**S&A Post Graduate Student Program  
 International Travel Application**

Contact People

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| --- | --- |
| Robert Hollow  Student Program Coordinator  02 9372 44247  [robert.hollow@csiro.au](mailto:robert.hollow@csiro.au) | Leanne Edwards  Student Administration  02 9372 4246  [leanne.edwards@csiro.au](mailto:leanne.edwards@csiro.au) |

|  |  |
| --- | --- |
| **Applicant Details** | |
| Surname |  |
| First Name |  |
| University |  |
| Expected date of Thesis submission |  |

|  |
| --- |
| **Justification For Travel** |
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| --- |
| **Travel Itinerary** |
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|  |  |  |  |
| --- | --- | --- | --- |
| **Trip Costings** | | | |
| eg: Flights  Accommodation  Meals | | | |
| Total amount requested from S&A | $ | Total amount requested from other sources | $ |

|  |  |  |
| --- | --- | --- |
| **Approvals** | | |
| **Name** | Signed | Date |
| **University Supervisor**  **name** |  |  |
| **S&A Supervisor**  **name** |  |  |
| **S&A Student Program Coordinator**  Robert Hollow |  |  |
| **S&A Program Director** name |  |  |