



The Australasian Society for Classical Studies

AMPHORAE XII

Auckland 2018

Travel subsidy form

Personal Information

Name: _____

Email: _____

University: _____

University address: _____

Degree programme: _____

Year(s) of enrolment: _____

Travel Information (add or delete items as necessary)

Departure point: _____

Travel item 1 (e.g. flights): _____

Cost: _____

Travel item 2 (e.g. airport bus): _____

Cost: _____

Accommodation: _____

Cost: _____

Total cost of travel: _____

University financial assistance: _____

Any other financial assistance: _____

Conference

Was your abstract accepted? _____

Certification

I certify that the above budgetary details are correct.

Signature of student: _____

I certify that the above enrolment details are correct.

Signature of supervisor: _____