

**College of Arts and Sciences**  
**Application Form - Undergraduate Day Student**  
**Dean's Research Travel Award**

Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_ Email: \_\_\_\_\_

Major: \_\_\_\_\_ GPA: \_\_\_\_\_ Class year: \_\_\_\_\_

Date(s) of Conference: \_\_\_\_\_ Location of Conference: \_\_\_\_\_

Name of Conference: \_\_\_\_\_

1. Is this the "national meeting," or equivalent, of your discipline? YES NO

2. Please describe your role at the meeting, including poster or paper title, and **attach research abstract**.

\_\_\_\_\_  
\_\_\_\_\_

Has your research been formally accepted for presentation at the conference? YES NO

**If so, please attach proof of acceptance.** If not, when will you be notified? \_\_\_\_\_

3. Estimated costs:

Travel: \_\_\_\_\_ Meals: \_\_\_\_\_ Lodging: \_\_\_\_\_ Registration: \_\_\_\_\_ **TOTAL:** \_\_\_\_\_

4. OTHER FUNDING SOURCES AVAILABLE TO STUDENT:

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

Source: \_\_\_\_\_ Amount: \_\_\_\_\_

NOTE: Support available from the Dean's Office is **up to** \$250 per student per fiscal year.

5. Signature of Research Mentor assumes additional responsibility of mentoring the student with the process of conference attendance and chaperoning the student. If another faculty member will be assuming any of these duties, please indicate her/his name and how s/he will support the student. Chair/Program Director signature and student signature are also required.

Research Mentor's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Other Responsible Faculty & Role: \_\_\_\_\_ Signature: \_\_\_\_\_

Chair/Program Director's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Awards are issued to students in the form of a check. By signing below, student assumes responsibility for providing documentation of attendance within 14 days of the end of the conference. (Normally, a copy of a paid hotel bill will suffice.) Please submit this documentation to Lorraine Hannon, 113-A Barbelin Hall. If student does not attend conference, all monies awarded must be returned to the university, whether or not expenses have been incurred.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student should also fill out Section 6 on Page 2 of this form, then give to Mentor, who fills out Section 7 and submits all via e-mail scan to Lorraine Hannon ([lhannon@sju.edu](mailto:lhannon@sju.edu)).

See webpage at <http://www.sju.edu/int/academics/cas/dean/> for other important information.

Name of Student \_\_\_\_\_ Name of Mentor \_\_\_\_\_

6. **Student**, please write a paragraph on the intellectual merit of your project and how presenting at this conference will help you toward your long-term goals.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. **Mentor**, please comment on the following criteria in the space below:

- a) Importance of this presentation for student's academic development and/or participation in an academic-related center or unit
- b) How closely the conference relates to the student's long-term involvement or expected long-term involvement with the academic subject or academic-related center or unit
- c) The significance of the conference or presentation venue in relation to the topic

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Mentor**, please e-mail a scan of both pages of the application (with required signatures), abstract, and proof of acceptance at the conference (if already accepted) to [lhannon@sju.edu](mailto:lhannon@sju.edu). Submission/Award cycles are:

<u>Submission Deadline</u>	<u>Award Letters to Students with cc: to Mentor, Chair/Director, and Other Responsible Faculty</u>
Nov. 15th	Nov. 30th
Feb. 15th	Feb. 28th
May 15th	May 31st
Aug. 15th	Aug. 31st