# C:\Users\mallison5\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\6PNVUUTZ\UR_CMYK.jpgDEPARTMENT (GROUP) TRAVEL GRANTS

# INFORMATION FOR UNDERGRADUATE STUDENTS

Support is available from the Undergraduate Research Program to help with expenses incurred by students presenting at virtual conferences. The intent of this support is to provide students with the opportunity to become actively involved in a professional organization as they pursue graduate school and other post-graduate plans. Students supported through this fund are expected to be actively involved in the proceedings of the conference. Active participation includes making oral presentations, presenting posters, or being part of a panel. In fine arts fields, active participation may include a performance or exhibition of a new composition.

Support is available for students majoring in any field. Note that students are eligible to apply for only **one** travel grant (individual or group) per academic year.

Applications requesting support for student travel should be submitted to Emily Moser at emoser3@elon.edu

**If you are awarded funding**:

* You will be expected to seek reimbursement through the UR office (reimbursement forms are available on our website).
* Please turn in receipts for reimbursement by the dates noted in your award letter.
* Note that travel grants do not carry over into the next academic/fiscal year (fiscal year runs June 1 – May 31). Any funds that are not spent will not be accessible after the academic/fiscal year closes.

**Undergraduate Research Program**

**Eric Hall, Ph.D., Director**

2345 Campus Box, ext. 5880

#### Powell Building

Room 108H

Department (Group) Travel Grant Application

Submit a typed application to Emily Moser at emoser3@elon.edu Applications must be submitted no later than **3 weeks** prior to conference date. Students are eligible to apply for one travel grant (individual or group) per academic/fiscal year and funds do not roll over to the next academic/fiscal year.

* **On the final page of this application, please list all the student presenters.**
* **Typically, the maximum grant per department per conference will be $1,500.00.** If your request is greater than the amount we can award, please seek additional funds from the dean of your school and/or your department chair.
* **Faculty members** serve as the point person for this application.
	+ If your application is approved, then the **faculty mentor** should gather all relevant original receipts from student presenters and submit reimbursements in **one request**.
		- This way the faculty member acknowledges that these receipts are for the group
		- The faculty member can clarify how much each student should be compensated
		- It helps the UR office track expenses given the faculty member is the point person for this request, not the individual students
1. **General Information**

|  |
| --- |
| Date Submitted: Click here to enter text. |
| Primary Faculty: Click here to enter text. |
| Primary Faculty Department: Click here to enter text. |
| Primary Faculty Email: Click here to enter text. | Primary Faculty Colleague ID\*:Click here to enter text.\*In OnTrack for Faculty, go to User Profile (under User Account) |
| Primary Faculty Campus Box: Click here to enter text. |
| Title of Conference: Click here to enter text. |
| Conference Dates: Click here to enter text. |

**Presentation/Performance Information (attach)**

For ***each***student presentation/performancebeing made at this conference please include the following information:

Title

1. Author, coauthors (or Presenter, co-workers)
2. Faculty mentors and their department
3. Presentation type (oral, poster, panel, dance performance, recital, other)
4. [100-250 word abstract or description of presentation]
5. \*A copy of the email/notice of **acceptance** to the conference. Please be sure this includes the students’ names.\*
6. **Expenses**

Itemized Expected Expenses:

|  |  |
| --- | --- |
| **ITEMS** | **EXPENSES** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
|  | Total Funds Requested | Click here to enter text. |

Are other funds available to support your travel grant? [ ] Yes [ ] No

If so, please indicate the amount of support from other sources. Click here to enter text.

What amount will likely not be covered by any funding source? Click here to enter text.

***Requests for reimbursements related to travel must be submitted no later than the end of the calendar month following the month of the conference. The Undergraduate Research Office will not necessarily be able to send a reminder of this reimbursement submission deadline.***

1. **Signatures**

|  |  |  |  |
| --- | --- | --- | --- |
| Primary Faculty’s Signature | Click here to enter text. | Date | Click here to enter a date. |
| Department Chair’s Signature | Click here to enter text. | Date | Click here to enter a date. |

**Barring extenuating circumstances, students who receive a travel grant from the Undergraduate Research Program are expected to submit an application to present at** [**SURF**](file:///C%3A%5Csienerth%5CMy%20Documents%5C~URP2004-05%5CURPWebPage%5CDreamweaver%5CSURF.htm) **either in the academic year of the award or in the following year.**

1. **Student Information**

Please provide complete information on *each* student presenter:

*(Feel free to cut and paste an additional information table if needed and deleted tables if not needed)*

|  |
| --- |
| **STUDENT RESEARCHER INFO** |
| Name (first and last): | Click here to enter text. |
| Phone: | Click here to enter text. |
| \*Student ID: | Click here to enter text. |
| Campus Box: | Click here to enter text. |
| Year in School: | Choose an item. |
| Major: | Click here to enter text. |
| Email (include @elon.edu): | Click here to enter text. |
| Expected date of degree completion: | Choose an item. |
| Currently enrolled in 4999? | Choose an item. |
| Currently enrolled in 4998? | Choose an item. |
| Fellow Status | Choose an item. |
| **STUDENT RESEARCHER INFO** |
| Name (first and last): | Click here to enter text. |
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| \*Student ID: | Click here to enter text. |
| Campus Box: | Click here to enter text. |
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\*student ID numbers are required