ACADEMIC CONFERENCE TRAVEL GRANT APPLICATION

Instructions: The faculty mentor of the participating student(s) completes questions 1-14 (students do not complete this form). When finished, the faculty member sends the entire form to the department chair, who then completes questions 15-18. The department chair then sends the completed form as an email attachment to scott.dunaway@byu.edu. The form must be received from the department chair's email account. Please complete the form using Adobe Reader, not Mac Preview. This application should be submitted no later than two months prior to the conference.

1.	Faculty member completing this form Are you the faculty mentor who supervised the research that will be presented at the conference?				
	Yes No? If no, indicate name of faculty mentor				
2.	Name of conference				
3.	Dates of conference				
4.	Date(s) student(s) will be presenting at the conference				
5.	Type of conference: Regional National International				
	Other – Describe:				
6.	Conference location				
7.	Participating student(s)				
	Name	Major	Year in School	Confirmation received that student can present: Yes/No	
8.	Nature of student's (or each student's if	more than one) partici	pation, i.e., poster,	paper presentation	
	·				
9.	Have funds from the Fulton or Hinckley Chairs supported the above student(s) participation at any other conferences?				
	If yes, explain. If this application is for more than one student, also identify which student(s) have been				
	previously funded.	,	,	. ,	
10.	Costs (if more than one, aggregate tota	I)			
	Registration				
	Travel (air and ground)				
	Lodging				
	Meals				
	Other (specify)				

Total

11.	Total amount requested per student				
12.	Total funding provided by the academic department for each participating student				
	If more than one student will participate, total for all students				
13.	Funding provided to support student's conference participation from any other source, i.e. faculty research funds. Indicate total amount and source.				
14.					
	project.				
Cha	ir Endorsement (Must be completed by the department chair)				
15.	Do you endorse this proposal?				
16.	Are the costs as outlined above reasonable and necessary? If no, explain.				
17.	Confirm that the department will provide the funding amount indicated in #12 above.				
	☐ Yes ☐ No				
18.	Describe special circumstances (if any) or provide any additional comments.				