APPLICATION REQUIREMENTS

Please make sure to fill out each blank on the application form. If there is missing information, it will be returned.

Date:

Applicant Name:

Applicant NUID #:

Applicant email address: Please use UNO email address

Daytime phone: Any number that can be reached and has voicemail

Are they employed block: This must be marked yes or no

Conference Title: Name of conference attending

Location: City and State of conference

Dates: Start and ending dates of conference (i.e. 8-10 August 2024 or 8/8/24-8/10/24)

Registration cost: If no cost, put \$0 or "free". If meals are included, please note that here. Include any information about paying a late registration fee, early registration fee, UG registration fee, doctoral registration fee, etc. Dean's office will reject if you don't include these details if they apply

Mode of Transportation: Air (one way or roundtrip), train, car, bus, van, or carpool

Cost of transportation: Please provide an estimated amount even if the cost is unknown. If driving, include gas, even though gas is part of mileage reimbursement. Dean's office will reject this is you don't put something in.

Hotel: If splitting the cost, list what your expected costs and note that you are sharing a room. If staying with family, please state that. Do not put "N/A" or \$0. If included in the registration costs, please note this. The name of the hotel is not required.

Meals: Please provide an estimated amount even if the cost is unknown. If provided with the registration fee, please state that. If included with registration fee but needing to account for meals due to special dietary requirements, please state that on the front page or on the back page.

Department: The parent department/unit of the student of the student applying for funding.

Department contribution: An amount must be listed here whether it is \$0 or \$1,000. Psychology pays \$0. We're broke.

Chair's Signature: Chair must sign before it comes to Dean's Office. PSYC staff will get the Chair's signature for you.

Other funding amount: List any other funding that will apply. <u>DO NOT</u> list a GRACA grant if it does not include travel expenses.

POST TRAVEL REQUIREMENT

Submit a travel summary within 30 days from the last day of the conference

- Must be 1-2 pages long
- Content focuses what you learned and your takeaways from the conferences
- Do NOT include personal information (i.e. spent time with family; drove with friends, nice accommodations, etc); only include information pertaining to the conference and what you learned from the conference, or the Dean's office will reject it.

SAMPLE APPLICATION



Student Request for College of Arts and Sciences Funding

The Dean of the College of Arts and Sciences offers **up to \$500** per academic year to students seeking financial assistance for student presentations at academic conferences. Additional funds may be available for international travel. Generally, funding from the Dean's office is restricted to transportation and conference registration costs. A contribution from the student's home department and the department chair's signature indicate the department's support.

All requests must be submitted and approved by the Dean's office prior to your trip. No

funding will be provided by the Dean's office after the trip has occurred. Please attach a description, no more than one page, of your research project, your goals for this trip and an itemized budget for your travel. If you are traveling with another student and sharing costs, please turn your requests in at the same time. Please submit all requests to the Dean's office, ASH 280. If approval for funds is given, an email will be sent to you.

Upon your return from the conference, a one to two page summary **MUST** be turned in to the Dean's office **within 30 days** for your reimbursement from the Dean to be processed. **Within 60 days from the last day of your trip**, you will be required to complete an expense voucher and submit **original receipts to your department's Staff Assistant.** Please check with your department Staff Assistant for the proper forms and procedures for reimbursement.

Date:	
Applicant Name:	Fill in every blank line
Applicant NUID#:	or the Dean's office will reject it!
Applicant Email A	Address:
Daytime Phone:	Are you an employee of the University? Yes \Box No \Box
Conference NOT	TES FOR YOUR SANITY:
(sta	als and lodging, if you are staying with friends or family and don't need either, enter \$0 ying with others) on both lines. Otherwise, make your best estimated guess, or you
Dates:can	go online and do some research Registration Cost:
Mode of Trar ^{Dep}	eartment contribution: Enter \$0
Hotel:	Meals:
Department:	Department Contribution:
Chair's Signature	: Date:
Other Funding Ar	mount (e.g. GRACA or other grant):
Amount Approved	d by Dean's Office:
Dean's Signatur	re: Date:
Ν	NOTES FOR YOUR SANITY:
Y	You do not need to get the Dean's signature; PSYC staff will do that.