

**Chair of Epidemiology Travel Award
Application Form**

Student name: _____ Date application submitted: _____

Program: PhD MSE MPH First term/year in current program: _____

Event title: _____

Event Dates: _____ Event Location: _____

What will you do at the meeting (check all that apply)?

Present research as oral presentation/symposium Present research as poster presentation

Attend workshop

Other (describe): _____

How will this event promote your career development?

Number of prior Chair Awards **this fiscal year** : _____

Number of **total** prior Chair Awards: _____

Applied for other sources of funding *for this instance of travel*?

Graduate Student Council Travel Grant

Maximum available: \$ _____ Amount awarded: \$ _____

Other (specify): _____

Maximum available: \$ _____ Amount awarded: \$ _____

Funds committed by mentor(s)? *Mentors must sign even if they are not committing funds.*

Mentor name: _____ Amount committed: \$ _____

Mentor signature: _____

Mentor name: _____ Amount committed: \$ _____

Mentor signature: _____

Student signature: _____

Please also attach the following documentation:

1. Official notice of acceptance of abstract/workshop enrollment
2. Estimated expenses by category (e.g., airfare, lodging, registration)

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Academic Program Assistant Review

Regularly attends department activities? YES NO _____

Academic Program Assistant initials: _____

Chair Review

Amount awarded from Chair's Travel Award: \$_____

Chair Initials: _____

Notes:

Date Complete:

____/____/____

Student notified	<input type="checkbox"/>
Fiscal Asst. notified	<input type="checkbox"/>