

**TRAVEL GRANT REIMBURSEMENT APPLICATION**

Travel Grant reimbursements are awarded on a competitive basis to students who have had an abstract accepted for a poster or oral presentation at a regional or national conference.

- This is a reimbursement grant-you will need to arrange and purchase your own travel up front prior to your trip.
- Please submit this application *at least 30 days prior* to your attendance at the conference for pre-approval. If approved, then you will need to submit your receipts within one week after your return from the conference.
- You must submit for pre-approval of travel grants between July 1-May 30. Pre-approval requests are not accepted during the month of June.
- If your trip requires **airfare** please be sure to submit your credit card statement showing the charges **AND** a print out of your itinerary as proof of your purchase

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**Application Materials**

**Please attach the following materials to this application:**

Copy of your accepted abstract or paper

Verification that your abstract/paper has been accepted for presentation

A brief statement explaining why attending this conference will assist you in reaching your educational goals

Copy of your completed Conference registration materials

Transcript/DPR

Conference Travel Faculty Evaluation

**Signatures**

**I have read and understand the attached travel reimbursement guidelines and will adhere to the UCLA Travel Accounting policies. All expenses in this report were incurred by the student seeking reimbursement and reimbursement for these expenses will not be sought from other sources. The information provided in this application is accurate to the best of my knowledge.**

\_\_\_\_\_

**Student**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Faculty Research Mentor**

\_\_\_\_\_

**Date**

**UCLA** Undergraduate Research Center - Sciences

<b>Date Submitted:</b>	
<b>Student Information</b>	
<b>Name</b>	
<b>Student ID</b>	<b>Birthdate</b>
<b>E-mail</b>	<b>Phone</b>
<b>Expected Graduation Date</b>	<b>Major</b>
<b>Current Mailing Address</b>	
<b>Permanent Mailing Address</b>	
<b>Are you currently a UCLA student worker?</b> Yes No	
<b>Faculty Research Mentor</b>	<b>Faculty Mentor Department</b>
<b>Faculty Mentor E-mail</b>	
<b>Citizenship:</b> US Citizen                      Permanent Resident                      Visa (type _____)	

<b>Conference Information</b>			
Conference Name			
Conference Dates: From _____ to _____		Conference Location	
<b>I will participate in the conference by (please select one)</b>	<b>Poster Presentation</b>	<b>Oral Presentation</b>	<b>Other (Explain):</b>
<b>The research was completed as part of (please mark):</b>			
<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="text-align: center;">____99 Course</div> <div style="text-align: center;">____199/198 Research</div> <div style="text-align: center;">____Volunteer</div> <div style="text-align: center;">____Paid Lab Work</div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 10px;"> <div style="text-align: center;">____URFP</div> <div style="text-align: center;">____URSP</div> <div style="text-align: center;">____Amgen Scholars</div> </div> <p style="margin-top: 10px;"><b>Other (please specify):</b></p>			
<p><b>*NOTE: If you are part of a research program not listed here, please speak with your program representative about the availability of travel funds prior to submitting this form.</b></p>			
<b>Conference Funding</b>			
<p>Did you apply for a travel grant with the conference?</p> <p>Was the travel grant awarded?</p> <p>If so, how much was the award? \$_____</p> <p>List, if any, additional sources of travel funds: _____</p> <p>Amount: \$_____</p>			

<b>OFFICE USE ONLY</b>		
Application Approved: Y / N	Amount Approved: \$	Date:
URC Director Signature:		
Notes:		

**CONFERENCE TRAVEL FACULTY EVALUATION**

Faculty Sponsor: We do not have sufficient travel funds to meet the demands of all students requesting travel support. We ask that you please complete this form to assist us in the evaluation of the student's request for a travel reimbursement award.

Student's Name: \_\_\_\_\_

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

1. How many quarters has the applicant conducted research in your laboratory?
2. How will the student benefit from participating in this conference?
3. What is the relative importance of this conference in comparison to other meetings?
4. Will you or other members of your lab attend this conference?
5. Do you have funds available to support the student in any travel expenses to the conference? Y / N If so, please indicate the amount.
6. Please provide any additional information that might assist in evaluating this student's application for travel funds.

Faculty Name:		Department:	
Phone:	Faculty Mentor Signature (original signature required):		