College of Natural Science and Mathematics
STUDENT TRAVEL GRANT PROGRAM

Name: _____
First *M.I.* *Last*

Student ID# _____ Contact Phone: _____
A current phone# must be provided

Mailing Address: _____ Email Address: _____
_____
_____

Degree Sought: _____ Department: _____

Semester & Year Admitted to Program: _____

Expected Graduation Date: _____

Which travel grants(s) are you applying for? (Check all that apply)

- ☐ Olaus Murie Caribou Fellowship
- ☐ CNSM Travel Grants

A. Have you ever received funding (for your current degree program) from CNSM for travel?
Yes / No

B. Is your presentation based on research or work related to your degree program?
Yes / No If yes, explain: _____
_____
_____
_____

Name and location of Conference: _____
_____

Dates of Conference: _____ Amount Requested: $ _____

Advisor's Name: _____

Signature of Department Chair: _____ Date: _____
(Required)

Student Signature: _____ Date: _____

Dean's Signature: _____ Date: _____

Approved for $: _____ Denied: _____