DAVID H. AND ANNIE E. LARRICK GRADUATE STUDENT TRAVEL SUPPORT FUNDS
IANR STUDENT RESEARCH TRAVEL FUND
UNIVERSITY OF NEBRASKA – LINCOLN
APPLICATION FOR FUNDING TO PARTICIPATE IN A SCHOLARLY MEETING
(requires Acrobat Reader)

Applicant First Name:

Applicant Last Name:

Applicant Email address:

Department:

Degree Program: ☐ M.S. ☐ Ph.D.   Expected Graduation Date:

mm/yyyy

Faculty Advisor Name: Faculty Advisor Email:

To search for faculty emails, visit http://directory.unl.edu/

Were you awarded a Larrick or Whitmore Travel Grant in the past?
Students may only receive one travel award per degree program (1 for M.S. and 1 for Ph.D.).   ☐ Yes   ☐ No

   If yes, when (date and degree program):   mm/yyyyy and Program (MS or PhD)

Name of Meeting or Conference (in full, no abbreviations):

Location of Meeting: Dates of Meeting/Conference:
   City, State (Country if outside the U.S.)   mm/dd to mm/dd/yyyy

Type of presentation: ☐ Oral   ☐ Poster

Expected Travel/Registration Costs:
(Please note that your pre-travel authorization must be submitted prior to travel in order to receive funds)

Total expenses to attend conference/meeting:	$
Total requested from Travel Funding (not to exceed $350)	$

Presentation Title:

Presentation Authors in the order submitted to the
meeting sponsor.
    Put an asterisk (*) after the name of presenter.
    Please put each presenter on a separate line if possible.
    Only the student presenter is eligible for funding.

Please confirm that student will be the person presenting at this conference.   ☐ Yes

Supplemental Files

Attach* abstract as submitted to the meeting/conference organizers and the ***acceptance letter*** *(or email) from the conference sponsor. (If you have not yet received your acceptance letter, then attach your submission confirmation. See* FAQ *on the ARD website for further details.)*

*If preferred, the files can be embedded into the PDF document as new pages.

To view attached documents, go to View>Show/Hide>Navigation Panes>Attachments.

Please name your application as follows: "FirstName LastName_Larrick_mm-dd-yy.pdf"

Attach/insert additional materials <u>before</u> signing this application. Thank you.

Student Signature: Date:

Faculty Advisor Signature:

Approval (Department/Unit Head Signature):

To sign a PDF document or form, you can type, draw, or insert an image of your handwritten signature. Please go **here**.
If you wish to sign with or create a digital ID, you can find instructions **here** or **here**.

Please review your application to ensure that the information is accurate, and you have included all necessary materials. If you have questions visit the FAQ on the ARD website **prior** to submitting your application to your department.

The application **must** be submitted by your department.

Submission Instructions:

- After filling out the form attach or insert the additional requested materials:
    1. full abstract as submitted to the conference organizers
    2. acceptance letter / confirmation of abstract submission.
- Electronically sign the application, and save the pdf with the following naming protocol: "FirstName LastName_LW_mm-dd-yy.pdf".
- Send the application to your faculty advisor as an email attachment for their approval; it will then be sent on to your department head for approval and signature.
- Your department will submit your application (with signatures) to ARD.
  Do not send your application to ARD directly; it must be submitted by your department.
- A confirmation email will be sent to your department upon receipt of the application.