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 addre	ss:						
Department:							
Degree Program: ☐ M.S. ☐ Ph.D.			Expected Graduation Date:			m	m/yyyy
Faculty Advisor Name:			Faculty Advisor Email: To search for faculty emails, visit http://directory.				nttp://directory.unl.edu/
Were you awarded a l	_arrick or V	Whitmore Travel Grant in	n the past?	□Yes	□No		
If yes, when (date	and degre	ee program):				mm/yyyy	y and Program (MS or PhD
Name of Meeting or C	Conference	(in full, no abbreviation	s):				
Location of Meeting:	City, State	(Country if outside the U.S.)	Da	tes of Mee	eting/Confer		nm/dd to mm/dd/yyyy
Type of presentation:	□ Oral	□ Poster					
Expected Travel/Regis		o sts: thorization <mark>must</mark> be submit	tted prior to ti	ravel in ord	ler to receive j	funds)	
		enses to attend confere		•	\$		
	Total req	uested from Travel Fund	ling (not to e	exceed \$4	00) \$]
Presentation Title:							
Presentation Authors meeting sponsor.	in the ord	er submitted to the					
Put an asterisk (*)	after the i	name of presenter.					
Please put each p	resenter o	n a separate line if possil	ble.				
Only the student p	oresenter i	s eligible for funding.					
Please confirm that st	udent will	be the person presentin	g at this con	ference.	□ 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 before 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.