

2024 Travel Grant Application Form

FACE PAGE

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| Title of Paper/Poster: |  | | |
| Format: | Poster Presentation  Oral Presentation | | |
| Name, Degrees and Title of Principal Investigator (PI): |  | | |
| PI’s Institution/School/Department: |  | | |
| PI’s Mailing Address: |  | | |
| PI’s E-mail Address: |  | | Tel: |
| Funds Requested: |  |  | |
| Name of Scientific Meeting: |  | | |
| City, State: |  | | |
| Date(s) of Meeting: |  | | |
| **CERTIFICATION** | | | |
| As PI for this project, I certify that the information submitted within this application is true, complete and accurate to the best of my knowledge. If this proposal is funded, I agree to accept responsibility for the scientific conduct of the project and to provide progress reports in a timely manner.  Provide electronic signature by typing name in shaded box and checking the “Confirm Signature” box.    Confirm Signature:  Date: | | | |

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| BIOGRAPHICAL SKETCH Provide the following information for the Principal Investigator. **DO NOT EXCEED TWO PAGES.** | | | | |
|  | | | | |
| NAME | | POSITION TITLE | | |
| EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)* | | | | |
| INSTITUTION AND LOCATION | DEGREE  *(If applicable)* | | MM/YY | FIELD OF STUDY |
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Complete the educational block at the top of this format page and complete sections A, B, C and D as explained in the Travel Grants Announcement.

     *Biosketch continued*

ABSTRACT OF PAPER/POSTER

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Total should not exceed $1,500.

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| BUDGET SUMMARY | |
| Early-bird Registration Fee |  |
| Airfare (economy) |  |
| Ground Transportation |  |
| Lodging |  |
| Meals |  |
| **TOTAL COSTS REQUESTED** |  |