

OLD DOMINION UNIVERSITY

APPLICATION

Section I: Applicant information

A. Name: _____ B. Date: _____

C. Program Masters Ph.D. Full-time Part-time

D. Department _____

E. ODU Email: _____

Section II: Please indicate the professional meeting for which you are requesting support

A. Meeting: _____

B. Meeting dates: _____ C. Refereed: Y N

D. Conference type: National International

Section III: Estimated expenses (max. amount of support available = \$350 per year)

A. Estimated travel cost: _____

B. Estimated registration cost: _____

C. Estimated lodging cost: _____

D. Total amount requested (max \$350): _____

Section IV: Funds from other sources

A. Amount: _____ B. Source: _____

Section V: Proposal(s)/Creative Activity(ies)

A. Title: _____

B. If presenting, or leading a workshop:

1. Submit a one page (maximum) abstract for the paper being submitted, or attach a one page description of the activity you will be leading.
2. If presentation accepted or invited, attach appropriate verification. Presentations under review are not fundable until the acceptance notification is received.
3. Denote presentation status: Accepted Invited

Section VI: Authorization and signatures

Signature of advisor: _____

(Printed Name) (Title) (Signature)

Signature of applicant: _____

Checklist of documentation

Documentation of presentation acceptance or other relevant activity