Old Dominion University Fellowship of Women in Science (FWS)

Conference Travel Award Application

Name:			
Type of student (circle one):	Graduate	Undergraduate	
Degree/program:			
Please list the FWS events you h	ave attended, alo	ng with the date of each:	
Conference name:			
Dates:	Location:		
Will you be presenting? (circle o	ne): No	Yes - poster	Yes - oral
Total amount requested (can be	up to \$500):		
Please list how much of t	:his amount is fron	n each category:	
Registration:			
Travel (airfare/gas	s/etc.):		
Hotel:			
Poster printing:			
Other (describe):_			
Are you receiving any other fund	ling for this confe	rence? (Describe):	

Do you under any funds?	rstand t	hat submitting this application does not guarant	ee that you will receive
Circle one:	Yes	No	
Do you under amount requ		hat if you are chosen to receive funds, you migh	t not receive the full
Circle one:	Yes	No	
30 days of the	e confe	hat as a condition of receiving funding from FWS rence, a photograph of yourself with someone yourbing how you benefited from attending the co	ou met at the conference
Circle one:	Yes	No	
	•	mission to use your submitted photograph and page, and other locations? Circle one: Yes No	paragraph on the FWS
Have you atta	ached y	our abstract and supporting documentation to t	his application?
Circle one:	Yes	No	
Signature:			_Date:

Please turn this form in to any member of the FWS executive committee or scan and email it to jdoss003@odu.edu. Please attach your abstract and supporting documentation for the funds requested (i.e. verifying registration cost, hotel cost, airfare cost, etc.). If you have any questions, please email jdoss003@odu.edu.