

GRADUATE STUDENT RESEARCH TRAVEL and PhD DISSERTATION FUNDING **Application**

Purpose

Total:

CEHD graduate students who are presenting research at conferences are eligible to apply for funding to cover travel costs. The student must be presenting the research (non-presenting coauthors not eligible). CEHD PhD students who are conducting empirical research are eligible to apply for funding to cover the cost of data collection. Students are only eligible for one round of funding per academic year, and students funded for conference travel will not also be funded for dissertation data collection. Funding will only be provided once per presentation (i.e., 1 student will be funded per presentation, or multiple students can split the funds equivalent for one student).

Timeline (recurring annually)

- Nov 1 for travel or dissertation purchases occurring between Aug 16-Dec 31
- for travel or dissertation purchases occurring between Jan 1-May 15 Feb 1
- Apr 1 for travel or dissertation purchases occurring between May 16-Aug 15

Student First Name				Las	t Name:				
Student/EMPLID		Email					Phone		
Advisor:									
Program:				Degree	Level (MA	, Pr	nD):		
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Conference Locatio									
Conference Dates:					End Date):			
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Research & Development Committee (R&D)

PhD Dissertation Funding: (leave blank if applying for travel funding) Title of Dissertation: Proposal approved by committee? (yes/no) Date: Study overview: Summarize your dissertation study, including the issue/problem you are exploring, the significance of the problem, research questions, and intellectual merit (200 words or less). Methodology: Summarize the methodology of your study, including the data collection procedure, number of expected participants, and analytic approach to answer your research questions (200 words or less). Budget: Provide detailed information regarding the expenses of your project, justification for their need, timeline, and process for purchasing and reimbursement (200 words or less, \$750 budget max). **Required Signatures:** Date_____ Approved | Amount: \$_____ Denied CEHD Dean or ADRFD: Date _____