

**COAST Student Travel Award**

**Reporting Form**

Please return this form to COAST via email ([csucoast@csumb.edu](mailto:csucoast@csumb.edu)) within 30 days of the conference.

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| **Awardee Information** | | | |
| First Name: |  | Email: |  |
| Last Name: |  | Student ID#: |  |
| CSU Campus: |  | Degree Sought (e.g., BS, MS, PhD): |  |
| Department or Degree Program: |  | Faculty Mentor: |  |

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| **Conference Information** | |
| Name of conference: |  |
| Location or remote: |  |
| Dates: |  |

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| **Presentation Information** | |
| Title of presentation (**not in all caps please**): |  |
| Authors: |  |
| Poster or oral? |  |

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| --- | --- |
| **Financial information** | |
| Amount of COAST award: |  |
| Approximate total cost of your travel (including personal contributions and funding from other sources) or remote conference registration fee: |  |
| Were you able to obtain funds from any other sources (excluding personal contributions)? If so, please explain. |  |
| Have you submitted your travel claim to your Department or College for reimbursement and if so, to whom (name and email address)? |  |

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| **Abstract**: Please submit a copy of the accepted abstract for the conference you attended (either remotely or in-person), including problem statement, methods and approach, results and conclusions. Please keep your abstract to 250 words or less. The abstract and your award information will be posted on the COAST website: <https://www2.calstate.edu/impact-of-the-csu/research/coast/funding/Pages/past-student-awards.aspx>. |
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| **Award Impact Summary:** Please provide a summary of the impact of this award on your undergraduate or graduate experience and professional goals (one-page maximum). How was your presentation received and what feedback did you obtain? How did the presentation help your thesis/project? Did you make contacts or connections that will enhance your studies/career? What did you enjoy most about the conference? Would you have been able to attend the conference without the COAST Student Travel Award? | | |
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**Please provide the demographic information requested below.** These data are to support COAST’s efforts to document diversity among program participants with the ultimate goal of increasing diversity in marine science.

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| **Gender Identity. Choose all that apply by marking the gray box with an X.** | | |
|  | Female |
|  | Male |
|  | Non-binary/gender-nonconforming |
|  | Decline to state |

|  |  |
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| **Do you identify as a member of a racial or ethnic group that has been historically excluded from marine and coastal science?** This includes but is not limited to the following groups: Hispanic, Latina/o, Black or African American, Asian (including East, South and Southeast Asian), Pacific Islander, American Indian, Alaska Native, or a combination of identities. | |
|  | Yes |
|  | No |
|  | Decline to state |

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| **Are you the first person in your immediate family to attend college at a four-year university?** | |
|  | Yes |
|  | No |
|  | Decline to state |

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| **Do you receive financial aid?** | |
|  | Yes |
|  | No |
|  | Decline to state |