

**Student Travel Award Program**

**AY 2018-2019 Application Form**

**Save this file as *LastName\_FirstName.docx* and email it as an attachment to:** [**studenttravelcoast@share.calstate.edu**](mailto:studenttravelcoast@share.calstate.edu)**.**

A ***complete***Student Travel Award application includes 1) this application form, 2) Statement of Endorsement from your Faculty Mentor, and 3) Department Commitment Form.

Your application will not be considered for funding until all items are received.

See the website for more details: [https://www2.calstate.edu/impact-of-the-csu/research/coast/funding/Pages/student-funding.aspx#student-travel-awards](https://www.calstate.edu/impact-of-the-csu/research/coast/funding/Pages/student-funding.aspx#student-travel-awards).

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| **Student Applicant Information** | | | |
| First name: |  | Department or degree program: |  |
| Last name: |  | Student ID#: |  |
| CSU Campus: |  | Anticipated graduation date (mm/yy): |  |
| Email: |  | Degree sought (e.g., MS, PhD): |  |
| Phone: |  | Have you previously received a COAST Travel Award? |  |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Award Information** | | | | | | Amount of travel funding requested (maximum limit: $750 for travel within California, $1000 for travel outside California): | | | | | |  |  | | | | | Travel award justification (250 word maximum): Provide a detailed budget for your trip including estimated costs for all transportation, lodging, meals, conference registration fees and incidentals, and all secured and pending support (source and amount): | | | | | |  |  | | | | | **Faculty Mentor Information** | | | | | | First name: | |  | Position/Title: |  | | Last name: | |  | Email: |  | | CSU Campus: | |  | Phone: |  | | Department: | |  |  |  |  | | --- | --- | | **Conference Details** | | | Name of conference or meeting: |  | | Dates held: |  | | Location: |  | | Session or symposium title (if applicable): |  | | Presentation format (oral or poster): |  | | Title of presentation: |  | | Authors, with institutional affiliations: |  | | Date abstract submitted: |  | | Date abstract accepted (please enter “N/A” if abstract has not yet been accepted): |  | | Copy of abstract: |  | | Evidence of abstract acceptance or submission (paste the electronic communication from the conference organizers regarding your abstract submission or acceptance): |  | |

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