

Student Travel Award Application

Directions: Please type your responses, sign below, and print this form. Scan and save completed form as a PDF file. A complete application includes the following two documents in PDF format: this completed form and proof of acceptance of abstract by conference. Using your UNLV Rebel e-mail, send all documents to miguel.fudolig@unlv.edu with the subject line "SPH Student Travel Award Application: YOUR NAME". Applications are accepted throughout the year. Thank you for your interest in presenting your research and representing the SPH at a conference.

| • | I Student Travel A erest in presenting | | | • • | are accepted throughout the year. nference. |
|-----------------------------------|---|-------------------------------------|-----------------|----------|--|
| UNLV SPH Stude | nt Name: | | | | |
| Student Type: | PhD | МРН | МНА | ЕМНА | Undergraduate |
| Area of Concentration of Studies: | | Environmental & Occupational Health | | | Epidemiology and Biostatistics |
| | | Healthcare Administration & Policy | | | Social and Behavioral Health |
| SPH Faculty Men | tor: | | | | |
| Conference Info | rmation: | | | | |
| Name of Confere | nce: | | | | |
| Date of conferen | ce (Month/Year): | | | | |
| Location of Confe | erence (City/State/ | Zip Code): | | | |
| Conference web | address: | | | | |
| Conference conta | act name & e-mail a | address: | | | |
| Conference Budg | get: | | | | |
| Total Amount Re | quested: | | | | |
| Conference Itemi | zed Expenses: | | | | |
| ı | Registration Fees: | | | | |
| - | Travel: | | | | |
| 1 | Lodging: | | | | |
| Please list any ad | Iditional conferenc | e source(s) of | funding and amo | ount(s): | |

Revised 09/01/2023