

Molecular Biosciences
Neurobiology
Chemistry
Chemical and Biological Engineering
Biomedical Engineering

**IBiS TRAVEL AWARD
APPLICATION FORM**

Please return both pages of the application with the other application materials to Cathy Prullage in the IBiS office by noon of deadline date.

Materials to be submitted with the application

1. Travel award application form
2. Copy of the abstract that will be submitted for the meeting
3. CV including list of publications (include conference abstracts)

Application deadline date (*select one*): **11/15/17** or **4/2/18** or **7/16/18**

Student name: _____

Daytime phone number: _____ E-mail address: _____

Anticipated date of graduation: _____ Advisor: _____
Year

Research topic (or thesis title):

Name of the conference: _____ Conference date: _____

Conference web site: _____

I will be (check all that apply): presenting a poster giving a talk

Abstract title:

Significance and relevance of the meeting towards future goals:

Anticipated travel expenses (use expense sheet on the next page): _____

Amount requested: \$ _____

Student signature: _____ Date: _____

Advisor signature: _____

**IBiS TRAVEL AWARD
TRAVEL BUDGET WORKSHEET**

Instructions:

1. Apply to all possible funding sources, including: The Graduate School, the Center for Genetic Medicine, the Lurie Cancer Center, your training grant (if applicable), your NU department, and conference travel grants.
2. Refer to the conference website for accurate travel cost information.
3. Try to minimize your travel expenses by using group shuttles instead of individual taxis and by sharing hotel rooms. Please note: reimbursement of hotel charges will be capped at \$150/night, meals at \$35/day. Costs exceeding these caps will be the responsibility of the traveler.
4. IBiS will reimburse only the cost of early conference registration for members. Society memberships cannot be reimbursed.

PROJECTED COSTS

Early conference registration fee \$ _____

Transportation total \$ _____

Air/rail fare \$ _____

Public Transportation \$ _____

Parking/Tolls \$ _____

Hotel total \$ _____

Nightly rate \$ _____

of nights _____

Other expenses total (provide detailed list) \$ _____

_____ \$ _____

_____ \$ _____

TOTAL TRAVEL COSTS \$ _____

OTHER FUNDING SOURCES:

As a condition of the IBiS travel award I have applied to TGS - \$600.00

I will also be applying for travel funds from (check all that apply):

Lurie Cancer Center - \$ _____

Center for Genetic Medicine - \$ _____

Training Grant: _____ - \$ _____

NU Department: _____ - \$ _____

Others, please specify: _____ - \$ _____

TOTAL AMOUNT REQUESTED FROM IBiS PROGRAM \$ _____