THE UNIVERSITY OF TEXAS AT EL PASO COLLEGE OF SCIENCE

APPLICATION FOR STUDENT INCENTIVE FUNDS (STUDENT TRAVEL)

- Complete the form below (type or print legibly) and obtain the required signatures.
- Submit this form, with the original signatures to the College of Science (Bell Hall Room 100)
- Attach a copy of the program listing you as the first author or a copy of the conference invitation. Preference is given to those who have an official role (ex. Paper presentation)
- No International Travel is supported thru this fund (Includes Canada and Mexico)

Student Information			
Student Name	ID#_		Date
Department	Major	ug_ <mark>O</mark> gr_(<u>O</u> PH.D.
Contact Address			
Phone Number	E-mail		
Conference or Professional Meeting Information			
Conference/Meeting (Providence)	de exact title)		
Sponsoring Organization:			
Site of Conference (Locatio	n)		
Conference Dates: Attendance Dates:			
Date/Title of Presentation:_			
Co-Presenters:			
Supervising Faculty (Print N	Name & Signature Required)_		
	Estimated 7	Fravel Costs	
Transportation Cost: \$_		Car Other (Check One)	
Lodging: Cost per Night \$_	Number of N	Nights = Cost:	
Conference Costs \$	Other	Total Cost\$	
Matching Funds: Department Contribution Chairs/PI Signature			
Other Contribution			
FOR COLLEGE OF SCIENCE ONLY			
APPROVED FOR \$	NO	OT APPROVED	
Dean's/Administrator Sign	nature		
Account #		You must provide Roxanne Giron x d related documentation – Send to	5042 with a copy of CCSB 3.0206).