

**SRCLD  
STUDENT TRAVEL AWARD APPLICATION**

Please provide the following information and have your academic advisor send a letter of support.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Department: \_\_\_\_\_

**Mailing Address** (Include affiliation in mailing address?)    Yes    No

Affiliation (if part of mailing address): \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Contact Information**

Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**Other Information**

Name of advisor sending support letter: \_\_\_\_\_

What is your current degree program? (check one):

undergraduate     master's     doctoral     post-doctoral

Optional: Are you a member of an under-represented minority group according to the NIH definition?    Yes    No

Are you submitting a poster:?    Yes    No

If yes, are you a first author?    Yes    No

Citizenship status:     U.S. Citizen     Non-U.S. Citizen, Country: \_\_\_\_\_

**Important Information for Travel Award Recipients:**

1) Any U.S. resident who accepts a travel award must provide his/her Social Security number and mailing address in order to receive payment. Awards are distributed at the close of the conference.

2) Any Non Resident Alien who accepts a travel award must provide either a Social Security number or the following three items: 1) Individual Taxpayer Identification Number (ITIN), 2) Photocopy of passport (*photo page*), and 3) I-94 – Departure Record; if you've traveled from a country outside the United States to attend SRCLD (*this record is provided in flight and our copy must show the immigration stamp*). For those students with a Social Security number, awards are distributed at the close of the conference. Otherwise payment will be mailed within four weeks of the close of the conference.

**Mail To:**

SRCLD

University of Wisconsin-Madison

Goodnight Hall

1975 Willow Drive

Madison, WI 53706

ATTN: Karen Andriacchi