



ENRICHMENT PROGRAMS
OFFICE OF
UNDERGRADUATE RESEARCH

DEADLINE: April 13, 2020

OUR TRAVEL TO PRESENT RESEARCH AWARD 2019-20 APPLICATION OUTLINE

This document outlines information that will be collected in the online OUR Travel Award application. Your application must be submitted online through the OUR website: <http://ugradresearch.uconn.edu/travel-awards/>

APPLICANT INFORMATION

Student Name: _____ Student Admin #: _____

Email: _____ Cell Phone Number: _____

Home/Permanent Address: _____

Expected Graduation Date: _____ G.P.A.: _____ UConn Campus: _____

Major 1: _____ Major 1 School/College: _____

Major 2: _____ Major 2 School/College: _____

TRAVEL INFORMATION

This information is necessary for OUR to complete any required travel approval processes on your behalf **IF your application is approved**. Students engaging in **international travel** for academic purposes must register with UConn Global Affairs – Education Abroad in accordance with the [UConn Student International Travel Policy](#). Students will be automatically enrolled and covered by Cultural Insurance Services International (CISI) Health Insurance for the duration of their trips upon their completion of the UConn Education Abroad student travel registration form. [Learn more](#) about health insurance costs and the Education Abroad registration procedure.

Type of travel? In-State, Out-of-State, International

Name of Conference (please spell out fully): _____

Location of Conference: _____

Dates of Conference: _____

Upload confirmation that your project has been accepted for presentation at this conference (PDF)

Departure date/Return date: _____

Departure airport or station/Return airport or station (if trip involves air or train travel)

RESEARCH OR CREATIVE PROJECT & BUDGET INFORMATION

Project Title: _____

Briefly describe your research or creative project, including its objectives and outcomes. Explain your choice of presentation venue and how you expect this presentation opportunity will enrich your educational experience (maximum 4000 characters).

Please itemize the total budget for your travel expenses using the Budget Worksheet that is found on the OUR Travel Award page of the OUR website. You will be asked to *upload the Budget Worksheet* for your project (PDF

format). While the maximum award is \$500, it is important for us to know the total cost of the project so we can assess the extent to which these awards are meeting student and faculty supervisor needs.

Total amount of funding requested: _____

Please identify any other funding sources to which you have applied to support this research or creative project (e.g., Presidential Scholar enrichment funding, Rowe Scholar funding, departmental funding, etc.).

Have you previously received an OUR Travel to Present Research Award?

- Yes, for the same project
- Yes, for a different project
- No

Please evaluate the importance of receiving OUR Travel Award funding to your ability to travel as described above.

- I could travel as described without OUR funding.
- I would have to modify my travel plans in the absence of OUR funding (e.g., reduce length of stay).
- I would not be able to travel without OUR funding.

Are there additional factors in your background or life experience that would help you benefit from this award program? Discuss social, economic, educational, or other obstacles, if appropriate. Optional (maximum 1500 characters).

ADMINISTRATIVE DATA & PERMISSIONS

Permission to print transcript: The Office of Undergraduate Research may include my unofficial transcript in my application.

Permission to access student information: The Office of Undergraduate Research may access information about me from StudentAdmin (ethnicity, first generation status, membership in groups such as Honors, receipt of scholarships such as Presidential Scholarships) and from Student Financial Aid Services (Expected Family Contribution). I understand that this information will be aggregated and used to assess how representative applicants for and recipients of OUR funding are of the overall undergraduate population. If my application is approved for funding, I understand that this information may also be used to match me to an appropriate funding source.

Permission to include name in press releases and other publicity relating to this award program: Yes or No

ACADEMIC INTEGRITY

Statement of Academic Integrity

By typing my name in the field below, I confirm that I have prepared all components of this application in accordance with University standards for academic integrity.