CAS Student Conference-Travel Grant Application

Name:	ID r	number:	
Email:			
Student Type: Under	graduate: □1st year □	Sophomore	□Junior □Senior
Gradu	ate: □Masters □PhD	Entering yea	ar
Major/Program:			
Conference Name:			
Conference Date:	L	ocation:	
Conference type: \Box R	egional 🗆 National	□ Internatio	nal
	\square Panel \square Poster \square Other (explain):		_
Presentation Title:		Pres	sentation Date(s):
_			If, as an undergraduate, you did not apply by. Attach another sheet if needed.
BUDGET: Item			
		A \$	mount ———
		\$	
		\$	
		\$	
Total		\$	
Faculty Name (Printed)		Faculty Na	mme (Signed)
Student Name (Printed)		Student Na	ame (Signed)

Please submit this form with proof of presentation acceptance to the CAS Associate Dean of Undergraduate Studies at casundergradstudies@american.edu.