



## Application for Student Research Travel Award

Awardees must be in good academic standing at their current educational institute

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_  
(Area Code) (Area Code)

E-mail \_\_\_\_\_ Fax \_\_\_\_\_  
(Area Code)

I am an ACS member. Year joined: \_\_\_\_\_ Membership # \_\_\_\_\_

I am a local section affiliate member. Year joined as an affiliate: \_\_\_\_\_

I am **not** an ACS member nor affiliate member, but I am a chemistry student.

I have received a previous ACS Student Research Travel Award ; If YES, please indicate amount and year award received \_\_\_\_\_

### Academic Training

Name of College or University (Include Current Enrollment)	City, State/Country	Curriculum Major	Title of Degrees Received/Expected	Month/Year Degree Received B.S., M.S., Ph.D. or Expected
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### Name of Conference, Location and Date Traveling to:

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**Reason for attending:**  Presenting research results (circle which POSTER or TALK)  
(check all that apply)  Attending Employment Clearing House  
 Attending workshop/course/committee  
(specify \_\_\_\_\_)  
 Attending presentation by \_\_\_\_\_  
 Representing College/University Student ACS Chapter

**If presenting a poster or talk, please legibly print title and all co-authors. ( also attach abstract)**

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List all travel funding support you are applying for (including any from your academic institution and anticipated amount) PLUS all travel funding you have already received to date (amount and source) :

\_1) \_\_\_\_\_

\_2) \_\_\_\_\_

\_3) \_\_\_\_\_

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Please NOTE: If you are awarded a Student Research Travel Grant from Toledo Section of the American Chemical Association, you are expected to acknowledge receipt of travel funds from us during your research presentation. You will also be encouraged to share your research at a Toledo ACS Section sponsored student research symposium (this is typically held in mid August).

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**Advisor Endorsement** (must include printed name, title, phone #, and signature with date):

By signing, I acknowledge this student is in good academic standing and the information provided is accurate to the best of my knowledge.

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**Student Signature:**

By signing below, (1) I've read and understood this application, (2) completed and acknowledge the information I provided is accurate, and (3) I intend to use award money for sole purpose of supporting my travel expenses to the meeting indicated.

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**Date**

**Submit Application**

Submit your application with proof of conference registration, a copy of your research presentation title and abstract, and a copy of your transcript (unofficial copy acceptable)

Deadlines for application are **by Feb 15 (for meetings March-June) and June 15 (for meetings July-November).**

**MAIL TO:**

Tina Hubbell  
Student Research Travel Award  
Toledo ACS  
2938 Kenwood Blvd  
Toledo, OH 43606