Department of Grain Science & Industry Graduate Student Travel Award Application

Applicant's Name			
	Last	First	Middle Initial
E-mail			
Degree Information:	o MS		
	o PhD	PhD Prelims Completed: O Yes O No	
	Start Date (month/year):		
	Target Completion Date (month/year):		
Approval of Major Prof	essor:		
Print Name			
Sign/Date			
Meeting Information (w	hat, when, wl	here):	
Are you presenting a pa	per?		
o Yes o No			
o Technical Ses	ssion	o Poster Session	
Session Title: _			
Are you receiving a trav	el award for	this same meeting from another source?	
o Yes o No			
Other Source: _			
Have you previously rec	eived a depar	rtmental travel award?	
o Yes o No			
If yes, list all: _			

Please use campus mail, email or drop off this **Application Form** along with your current CV/Resume, Recommendation letter from major advisor, and your abstract to Susan Kelly, BIVAP 101, or fax to 532.7193. Thank you.