

SANDERSON & SUNDICK TRAVEL AWARD APPLICATION

Application Date:		
Award Recipient:		I.D.#
Title of Paper:		
Co-author(s):		
I am requesting travel funds to	attend the:	
	(Title of conference/mee	The conference/meeting
(Date(s)	of conference/meeting)	(Location of conference/meeting)
Signature:	(Department Sponsor/P	
	(Department Sponsor/P	Program Director)
Stu	dent Confirmation of Accept	otance of Award
I confirm that I am a currently of Program at the School of Med conference/meeting listed abo	licine. I am the presenter of the	he above work, which I will present at the
Please find along with this app conference Chair and a budget		presentation, acceptance letter from the
	Date:	
Signature of Award Recipient		
I concur with the above inform		
Signature of Advisor	Duio.	·
	Approved: Not Ap	proved:
Signature of Department Chair	Date:	:
enginatare el population ondi		
	t of department award: award (please specify):	

TERMS AND CONDITIONS

- 1. Fellows must be in good academic standing.
- 2. Fellows must make a presentation in poster and/or oral form on his/her research in order to qualify for this award.
- 3. Fellows must submit an application with an abstract of the research to be presented at the national/international meeting to be evaluated for the award.
- 4. Fellows may use awards for travel to attend national and/or international scientific meetings. Awards may not be made for local and/or regional meetings/conferences.