Department of Nutrition & Exercise Physiology
Student Travel Award Application

Application Guidelines
This program is designed to promote the scientific development of students in the nutrition & exercise physiology fields. Students are eligible to receive one NEP departmental travel award per academic/fiscal year. Undergraduates may receive up to $1500 and graduate students up to $2000 per year, though typical awards will range from $500-800. Reimbursement rates from NEP departmental travel awards are limited in the following ways: Not to exceed $140/night for lodging; $550 for round-trip airfare; $100 for taxi & other forms of public transportation, parking, mileage for personal car use; $0 for meals. Mentors are expected to sign this form to verify the information provided and that they support the student's attendance/participation at the scientific meeting. (NOTE: A faculty member’s signature on this form is not a guarantee that the faculty mentor will reimburse the student for all travel expenses not covered by this NEP departmental travel award.) Students must complete and submit applications within one week of abstract submission. Submit completed application and copies of all relevant materials to Laura Franklin (204 Gwynn Hall) or by scanning and then emailing all of these materials to FranklinL@missouri.edu.

Student’s name & ID#: ____________________________ Today’s date: __________
Undergrads: Soph Jr Senior Major: ____________________________
(or)
Name of graduate program: ____________________________
Is the student a current member of ASN? Yes No (circle one)
Name of the meeting: ____________________________
Location: ____________________________ Dates: ____________________________

Title of oral presentation/poster (circle which one*):

* Note: Oral presenters will typically receive more $ support than students presenting a poster. (Students not presenting data are not typically eligible for NEP Departmental Travel Awards. Use space in the “comments” section below to explain why an exception should be considered.)

Mentor’s name: ____________________________
Mentor’s signature below confirms that they support this student’s participation/attendance at this meeting. Also, faculty are strongly encouraged to explicitly limit the total amount of travel expenses that they agree to reimburse students for above and beyond this travel award.

___________________________    ____________________________
signature    print name

Comments/special considerations:

(Students are required to attach a copy of the abstract for the student’s poster or oral presentation.) ____________________________ (Applicant’s signature)