



**NATIONAL CONFERENCE ON
UNDERGRADUATE RESEARCH
TRAVEL FUNDING APPLICATION**

STUDENT INFORMATION

_____ Last Name		_____ First Name		_____ Initial
_____ Banner ID	_____ Phone		_____ E-mail	
<input type="checkbox"/> Freshman	<input type="checkbox"/> Sophomore	<input type="checkbox"/> Junior	<input type="checkbox"/> Senior	
Have you previously attended NCUR?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, what year? _____

FACULTY MENTOR INFORMATION

_____ Last Name		_____ First Name	
_____ Phone		_____ E-mail	
School of	<input type="checkbox"/> Arts & Letters	<input type="checkbox"/> Business	<input type="checkbox"/> Health Sciences & Education
	<input type="checkbox"/> Science & Mathematics	<input type="checkbox"/> Social & Cultural Studies	

PROJECT INFORMATION

_____ Project Title	
<input type="checkbox"/> Oral Presentation	<input type="checkbox"/> Poster
<input type="checkbox"/> Performing or Visual Arts	
Will the results of this research be presented at any other off-campus conference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes: _____	
Conference Name	
_____ Location	_____ Date

Student Signature

Date

Faculty Mentor Signature

Date