AGEP/Turner Application for Conference Travel Award

Complete and submit this application along with all supporting documents to the Center for Inclusive Education in accordance with priority deadline date instructions.

Center for Inclusive Education Stony Brook University Melville Library E-1340 Stony Brook, NY 11794-3387 Tel: 631-632-9560 Fax: 631-632-1837

Student Information

Name:	Program:	Degr	ree:	
Are You?* _	AGEP only	AGEP and Turne	er	Turner <i>only</i>
Conference Information				
Conference Name:				
Organizing Agency:				
Conference Dates:	to		Location:	
Mode of Transportation:				
Registration Fee:				
Transportation Cost:				
Lodging Costs:				
Miscellaneous Costs (e.g. parking	, ground transport	ation, etc):		
Total Estimate of Costs:				
Is your advisor aware of your part Advisor Signature (required): *If your advisor is not available to sign conference.			Yes	
Student Signature:				Date:
Will you be making an oral or post *If you are presenting your research a addendum explaining the importance making a presentation)	at this conference, p of your attendance	lease attach a summary/ at this conference is requ		
Please provide information of all or trip (priority will be given to applicate				
Source(s):	Amount:	What will it		
OFFICE USE ONLY Approved for \$			By:	·
Special Instructions/Explanation	tion for Denial:			