

DISTINGUISHED TRAVEL AWARD
GRADUATE STUDENT ORGANIZATION
227 Student Activities Center
Stony Brook University, Stony Brook, NY 11794
Website: <http://www.sbgso.org>
E-mail: speaker@sbgso.org
2012-2013

The Distinguished Travel Award is a special line of funding designated to support graduate students who present their work at prestigious conferences, performances and professional meetings that will contribute to and build the national and international reputation of their department and the University. This is a competitive award funded by the Graduate School and the Graduate Student Organization. A student may receive this award only once during his/her academic career at Stony Brook University. Award recipients will be reimbursed after their conference/performance, as per the RAP funding guidelines. Award amounts may not exceed \$1500.

The application **deadlines** are:

November 20, 2012 at 11:59 PM EST

for conferences/performances between July 1, 2012 to December 31, 2012

April 1, 2013 at 11:59 PM EST

for conferences/performances between January 1, 2013 to June 30, 2013

Each applicant should submit a complete application in addition to the following **requirements**:

1. A written statement of no more than 500 words on the scientific or artistic contribution of the presentation, its impact in the national and international discussion of his/her area of specialty, and the significance of the event.
2. Curriculum Vitae
3. An invitation or acceptance letter to the event. This requirement be waived for conferences taking place between the call for applications and the first day of the Spring semester (Fall applications) and June 30 (Spring applications). In such cases, an invitation or acceptance letter shall be required for reimbursement.
4. A letter of recommendation from the student's advisor, stating the student's contribution and impact on the field or discipline.
5. A letter of recommendation from a Stony Brook University faculty member familiar with the student's work. This person **cannot** be the student's advisor. Letters may be solicited from faculty members with joint-appointments at Cold Spring Harbor and Brookhaven National Laboratories.
6. A nomination letter from the Graduate Program Director confirming that the student has been endorsed by the Graduate Program and that only two (2) students (three students if the Graduate Program, not Department, has more than 200 students) from his/her department have been nominated per application cycle.
7. This completed application form.

Complete applications should be submitted **electronically** to the GSO Committee of Academic Excellence: speaker@sbgso.org

**DISTINGUISHED TRAVEL AWARD
APPLICATION FORM – PAGE ONE – FOR STUDENT**

STUDENT PROCEDURE :

1. Fill out only the first page of this application with ALL information requested and have your advisor fill out the second page (incomplete applications will not be processed).
2. After the conference, for reimbursement, please attach original receipts for expenses claimed, including original boarding pass stubs or baggage claim tickets. (Attach copies of receipts for expenses being paid for by other funding agencies, in addition to any vouchers or other forms completed to obtain outside reimbursement).
- Note:** If applying for Spring, be advised that the GSO fiscal year ends on June 30, 2013. Therefore your paperwork has to reach the GSO office no later than June 30, 2013. If you need an extension, please contact the GSO Treasurer at treasurer@sbgso.org **no later** than June 30, 2013.
3. Provide a copy of the Conference/Event Program demonstrating proof of presenting a paper, a work of art, etc.
4. Have your program director/advisor complete page two of this application.
5. If you wish to have the check mailed to you, please bring a self-addressed, stamped envelope to the GSO Office (SAC 227).

Name (printed): _____
Student ID#: _____
Department & Program: _____
Mailing Address: _____
Email: _____
Phone #: _____
Description of Conference/Program _____

Date of Program: _____ Date of Application: _____
Destination/Location: _____
Amount requested: (not to exceed \$1500): _____

ITEMIZED STATEMENT OF EXPENSES: *If your conference has not occurred by the application deadline, please provide your estimated expenses.*

*** Original Receipts Required - Copies of Receipts for Expenses Claimed to Will Not Be Reimbursed ***

Travel: _____	Travel: _____
Lodging: _____	Lodging: _____
Meals: _____	Meals: _____
Other: _____	Other: _____
Total: _____	Total: _____

By submitting this application, I attest under penalty of perjury that the information given is truthful to the best of my knowledge. Any fraudulent attempts to secure funding over and above the total cost of a program will result in permanent ineligibility for GSO funding. The GSO will repost any fraudulent applications to any other funding organizations involved in your program, and will cooperate with any administrative and/or criminal proceedings undertaken by those organizations.

Applicant Signature: _____ Date: _____

Applicant name (printed): _____ Date: _____

DISTINGUISHED TRAVEL AWARD
APPLICATION FORM – PAGE TWO – FOR GPD / ADVISER

GRADUATE DIRECTOR/ADVISOR PROCEDURE:

1. Review the information provided by the student/applicant on the preceding page and please verify that all the provided information is accurate.
2. Indicate the source(s) and amount(s) of additional funding being provided by any other funding agency in relation to the conference/program listed by the student on page one of this application.
3. Review the certification statement, below, and provide your contact information where indicated.
4. Return the completed form to the student/applicant.

ADDITIONAL FUNDING (Check One):

Available funds from department or other agency will not cover the entire cost
Please indicate source of available funds (copies of receipts for these expenses required):

Please indicate the amount of money available: _____

Please attach an itemized statement showing which expenses these agencies paid / will pay for.

Funds for this project/program are not available from the student's department or any another agency.

By submitting this application, I attest under penalty of perjury that the information given is truthful to the best of my knowledge. Any fraudulent attempts to secure funding over and above the total cost of a program will result in permanent ineligibility for GSO funding. The GSO will also repost any fraudulent applications to any other funding organizations involved in your program, and will cooperate with any administrative and/or criminal proceedings undertaken by those organizations.

I hereby certify that the information provided on both page one and two of this application is true and correct.

Graduate Director/
Advisor Signature: _____ Date: _____

Graduate Director/
Advisor Name Printed: _____ Date: _____

Job Title/Position: _____

Relationship to Student/Applicant: _____

Address: _____

Phone Number: _____