

(Please print clearly or type, application deadline is April 30)

First Name, Middle Initial, Last Name, ASRS Member No.		
E-mail Address Daytime Phone		=
Street Address		
City State/Province, Zip Code, Country		
<b>Background Information</b>		
Academic Department:	_	
College/University:		
Degree Sought:BSMSPhD; Major		_
Expected or Actual Graduation Date:		
Presentation Type: Oral Poster Video Will you also submit a written paper of your work for publication in Reclamation Sciences?Yes No Reclamation Matters? Yes	No	
Paper/Poster/Film Title:		
Are you the senior author? Yes No Will you be making the presentation? _ Did you receive a Student Travel Grant last year? Yes No	Yes _	No
Advisor		
First Name, Middle Initial, Last Name		
E-mail Daytime Phone		
City State/Province Zip Code Country		

## (Continued from previous page)

## Projected Travel Expenses

Total projected travel expenses: \$(Please attach details; include estimated transportation, lodging, meals, and meeting registration fee.)
Total funds available from other sources such as grant funds, department, or university funds.  (Please attach details): \$
Outstanding travel needs requested from ASRS: \$
If projected expenses exceed maximum funds available (from other sources plus ASRS Travel Grant), attach details explaining how the difference will be made up.
Applications and requested materials should be submitted electronically by April 30 to the Student Engagement Committee through Dr. Julie LaBar, at jlabar@okstate.edu with the subject line "Student Travel Grant Application- Applicant's Name".
Verification
The undersigned represents that the information supplied above and on attached documents is true, that the applicant meets the eligibility requirements as stated herein, and that the financianeed as stated is accurate.
Student Signature and Date
Advisor Signature and Date