

Minnesota Section of the American Chemical Society Application for Graduate Student Travel Grant

Statement of Purpose: \$1000 travel grants are provided for graduate students to present their research at an ACS regional or national meeting.

Eligibility:

1. Recipients must be members of the American Chemical Society and attending a school in the region served by the MN Section.
2. Recipients must have registered to present a poster or give an oral presentation at the meeting.

Guidelines:

Submit application materials, as a single PDF file, by email to:

Paul J. Fischer, Professor of Chemistry, Macalester College, fischer@macalester.edu

Ideally, applications will be submitted via the applicant's research advisor with the recommendation letter added last by the advisor to allow confidentiality with respect to the letter.

If selected:

Reimbursement for expenses only is provided.

Payment will be made upon completion of the event and receipt of the following:

--Copies of the expense receipts up to \$1000. These can include registration fees, travel, hotel, and meals.

--A brief report or evaluation of the event.

--Digital photos are also welcome for publication on our website.

Receipts must be scanned and sent as a single PDF that includes an itemized list of the charges within 2 weeks of the end of the meeting to: Paul J. Fischer, fischer@macalester.edu

If funding is awarded, the remainder of this page will be used for reimbursement processing. Include here the desired address for mailing of the check.

Minnesota Section ACS Grant Reimbursement Form

Name _____

Phone Number _____

Email Address _____

Address _____

Application Part I: Student Portion

Name _____ Research Advisor _____
University/College _____
Complete Mailing Address _____
Telephone (____) _____
E-mail Address _____

Are you an ACS member? ** Yes No

Year entered graduate school _____

Currently on RA or TA or fellowship

Have you attended a national ACS meeting before? Yes No

If so, when? _____

Did you present your research at this meeting? Yes No

Please submit your CV along with this application.

Research abstract

Attach additional sheets if necessary.

Additional information that may help the selection committee:

Signature of student _____ Date _____

** Checking this box attests to the accuracy of this application. Your signature also gives express permission to the Minnesota Section of the ACS to share any or all of the information/data you have provided in support of this application with members of the Minnesota Section of the ACS, the Grants and Activities Funding Committee, and the Executive Board of the Minnesota Section of the ACS. If submitting this application via email, the originating email address must match that of the student as listed in the application.

Application Part II: Advisor Portion

Name _____ Name of Student _____

Complete Mailing Address _____

Telephone (____) _____ E-mail Address _____

Are you an ACS member? ** Yes No

Number of grad students in group _____

Number of postdocs in group _____

Recommendation letter

Attach additional sheets if necessary.

Signature of advisor _____ Date _____

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