

NSSA Student Award Application

Student's Name:

Date: _____

Last Name:

First Name:

Address:

Street Address:

Mail Stop:

City:

Zip Code:

Country:

E-mail address:

Phone Number:

Fax Number:

Student Affiliations:

Student's Current College or University:

Student's Academic Department:

Student's Expected Date of Graduation:

Name of Academic Advisor:

Are you a member of the NSSA?: Yes No

Conference Information:

Name of the Conference for which Travel is requested:

Date of Conference:

Conference Location: City:

State:

Funding Information:

Amount of funding requested (in US \$):

Justification of need for funds to attend conference (e.g. how this conference will enable student's research/career, benefits of this particular conference, other sources of funding sought, etc.):

Abstract of Poster or Talk to be Presented :

Important Note: *If funds are approved, proof of acceptance of the talk or poster (i.e. a copy of the official notification from the conference) must be submitted to the NSSA Treasurer before payment can be rendered.*