

Academic Opportunity Fund Application

Submit completed applications to *kennedy.thurgood@usu.edu*

Do not print this application

Academic Opportunity Fund TSC 326A 0105 Old Main Hill Logan, Utah 84322-0105

E-Mail: kennedy.thurgood@usu.edu

Phone: (435) 797-1716

Policies and Procedures

The purpose of the Academic Opportunity Fund (AOF) is to provide financial support to graduate students who wish to present research, showcase creative work, or compete in an academic competition.

The AOF is sponsored by student fees. AOF policies and procedures are meant to ensure that these funds are used responsibly

Eligibility Requirements

- A. Recipients must be graduate students in good standing with Utah State University
- B. Students must have already been accepted as participants in a reputable academic event
- C. Students must represent Utah State University at said event
- D. The conference must be for the purpose of presenting. That could be a poster, a paper, an exhibition, an academic competition, or a performance.
- E. Students must have received at least \$100 for their presentation or competition from a Utah State University department, college, and/or other university source
- F. The cost of food (per diem) and 10% of the total trip cost must be covered by the students themselves either out of pocket or through fundraising. University donations will not be considered fundraised dollars
- G. A *complete* application must be submitted less than six months and more than four weeks prior to travel to the event
- H. Only current (at the time of the conference), matriculated students at the Logan Campus in good standing can receive funding

Fulfilling the eligibility requirements does not guarantee funding

Application Requirements

- A. Applications will not be considered if any field is left incomplete (type N/A in inapplicable fields)
- B. A copy of the research abstract or competition summary must be attached
- C. Proof of acceptance to the conference/competition must be submitted at least four weeks prior to travel to the event
- D. Before the presentation to the Allocation Committee the Senate Pro Tempore will verify eligibility and conference registration/acceptance
- E. Students are expected to seek out the least expensive reasonable options. Prices will be checked.

Presentation to Allocation Committee

- A. If all eligibility requirements are met, candidates will be invited by the Senate Pro Tempore to present to the AOF Allocation Committee
- B. Presentations will be held in the Academic Senate Chambers (TSC 336) or via Zoom at the discretion of the chair.
- C. Presentations will be limited to five minutes.
- D. Presentations must include
 - a. A brief explanation of the research abstract
 - b. An extended explanation of the trip budget (as outlined on p. 4 of this application)
 - c. A question and answer period
 - d. An identical copy of the budget (page 6) must appear in the slideshow.

Use of Funds

- A. Expenses that AOF may cover
 - a. Conference registration fees
 - b. Travel to conference destination
 - c. Lodging at conference destination

- d. Travel within destination city
- B. Expenses that AOF will not cover
 - a. Food (per diem)
 - b. Employment of individuals (accompanists, judges, etc.)
 - c. Non-related expenditures during travel (tours, concerts, etc.)

Disbursement of Funds

- A. Funding is limited and will be awarded on a first-come, first-served basis
- B. No individual will be awarded more than \$500
- C. No group will be awarded more than \$2000
 - a. A group is defined as four or more people
- D. Precedence of disbursement is not a determining factor for the AOF Committee.
- E. Distribution is arranged through the Student Involvement and Leadership Center (SILC) and the student's department. A Travel Authorization (TA) must be completed through the student's department business manager before travel.

For more information contact your college senator or Kennedy Thurgood in the SILC:

Kennedy Thurgood (435) 797-1716 kennedy.thurgood@usu.edu

By signing your name on the applicant information section, both individuals and groups acknowledge they have read and agree to the policies and procedures of the Academic Opportunity Fund.

Participant Information & Signature

I certify that all information contained within this document is complete and accurate. I understand that if I fail to attend the conference for which I am awarded funds, I will be required to repay the funding in full. Failure to repay will result in a general hold being placed on my university records.

I understand that funding is limited. Travel awards are not guaranteed to every applicant.

If traveling outside the United States:

As a condition of accepting this award, I agree that I will use a portion of the proceeds to purchase International Travel Insurance through the University Risk Management office. The Risk Manager can be contacted at 435-797-1844 and the office is located in MAIN 155.

I have read and understand all other requirements and instructions as found in the Academic Opportunity Fund Policies and Procedures.

	Individu	al Applicant		
	(or contact person	if applying in a	group)	
Name				
College & Department				
A #				
E-mail				
Phone				
Are you an graduate student?		□Yes	□No	
Signature		Date		

Conference Information

Conference title (no acronyms):
Conference sponsor:
Location (city, state):
Dates of conference:
Dates of travel:
Title of Presentation:
Form of presentation: □ Poster □ Paper(presentation) □ Exhibition(art) □ Academic Competition □ Performance □ Other
If other, explain:
Please include a short description of the event:
Please describe what your role at the event will be:
Please describe how this experience is directly related to your field of study and how it will enhance your educational experience:
Please include any other pertinent information:

Funding Information and Budget

Expenses that AOF may cover

Conference registration fees

• Travel to conference destination

- Lodging at conference destination
- Travel within destination city
- Other conference related costs

Expenses that AOF will not cover

• Food (per diem)

Conference Expenses				
Acceptable AOF Expenses	Description of expense; Airline, car rental company, hotel, conference registration, etc.	Cost per Item	Quantity (total number of item(s) needed)	Line Total
Airfare				
Cost of lodging				
Travel within destination city				
Conference registration fee				
Other conference related expenses				
Total trip cost:				

^{*}An identical copy of this budget must appear in the slideshow presentation to the AOF committee

Funding Information and Budget

Per	sonal/Fundraising Col	
Amount Requir	,	Í
Personal Contr	ibution	
	Fundraising Contributions (if appli	cable)
Source 1	i unui unomg como no uviono (ii uppri	
Amount		
Contact Name		
E-mail		
Phone		
Source 2		
Amount		
Contact Name		
E-mail		
Phone		
	Tota	1
	(10% or greater	
	(10 /0 or greater)
	University Contribu	ution
Mandatory Dep (\$100 minimum	artment or College Source Amount)	
Contact Name		
E-mail		
Phone		
	artment or College Source Amount	
Contact Name		
E-mail		
Phone		
	Tota (\$100 minimum)	
	AOF Request	
Amount reques	ted from AOF	
D · D · ·	** For Office Use Only **	
Date Received		
Date Approved		
Date Denied		
Award Amount Date Awarded		
Notes		

Administrative Information & Signatures

	R	esearch Professor	
Name			
E-mail			
Phone			
	Ι	Department Head	
Name			
E-mail			
Phone			
I certify that all i	nformation contained w	vithin this document is con	uplete and accurate.
Research Profes	ssor Signature	Date	_
Department He	ad Signature	Date	

Group Information & Signatures

	Group Member
Name	
College & Department	
A#	
E-mail	
Phone	
Are you an graduate student?	□Yes □No
Signature	Date
	Group Member
Name	or out have
College & Department	
A#	
E-mail	
Phone	
Are you an graduate student?	□Yes □No
Signature	Date
	Group Member
Name	Group Member
College & Department	
A#	
E-mail	
Phone	
Are you an graduate student?	□Yes □No
Signature	

The following pages are for groups only. All group members must agree to the obligations outlined on page 6. Attach extra pages where necessary.

Submit completed application, research abstract, and proof of acceptance to kennedy.thurgood@usu.edu

Do not print this application.

Group Information & Signatures

	Group Member	
Name		
College & Department		
A#		
E-mail		
Phone		
Are you an graduate student?	□Yes □No	
<u> </u>		
Signature	Date	
	Group Member	
Name	1	
College & Department		
A#		
E-mail		
Phone		
Are you an graduate student?	□Yes □No	
G.		
Signature	Date	
	Group Member	
Name	1	
College & Department		
A#		
E-mail		
Phone		
Are you an graduate student?	□Yes □No	
	,	
	<u> </u>	
Signature	Date	