McNair Scholars Program

Funding Request for Research Conferences

Instructions: Please complete this form and obtain your faculty mentor's signature. The completed form should be dropped off to the McNair Office in Hood House, Room 210. Students will be notified of funding status and further instructions via email. Abstracts, posters, and/or any other presentation materials must be reviewed and approved by the student's faculty mentor prior to submission.

Type of Conference (select one):McNair	Non-McNair (i.e., conference within discipline)
Student Name:	Date:
Major:	Mentor:
Date(s) of proposed Travel:	
Title of Research Conference:	
Sponsoring Organization (i.e., School):	
Location (City, State):	
Please select the format of your research pro	esentation:Oral Poster Both Oral and Poster
Presentation Title:	
If you are planning to meet with faculty mer	ate departments and/or faculty members? Yes No mber(s), please provide their name(s) and department(s) and Please include a copy of your email correspondence with the
Objectives/Goals for the proposed travel: _	

COMPLETE THE SHADED SECTION FOR NON-McNAIR CONFERENCES ONLY

If you are presenting at this Non-McNair Conference, you must first submit an application through the Hamel Undergraduate Research Center to receive a grant for your transportation cost(s) and registration fee(s). You can find more information about their application at https://www.unh.edu/undergrad-research/research-presentation-grants.

Proposed Budget for Travel: This section must be completed by the student. Funding Requests three weeks in advance for students needing air travel.	s MUST be submitted a minimum of
Transportation: Air Train Bus Car	Budget:
Lodging: Hotel Dorm Other (Stay with Family/Friend	1)
Lodging, If Hotel or Dorm: # of nights x Rate \$	= Budget:
Registration Fees: Yes No	Budget:
	SUB-TOTAL:
Meals:	
How many meals are included in the registration fee?	
How many meals are <u>not included</u> in the registration fee?	
Please provide the # of meals <u>not included</u> : Breakfast	_ Lunch Dinner
McNair Staff Only: Additional Funds for meals:	Budget:
	TOTAL:
or lodging and you fail to attend or give yourself adequate time to	r your registration fee, transportation, cancel your registration, you will be
or lodging and you fail to attend or give yourself adequate time to required to refund the McNair program for all costs associated with	r your registration fee, transportation, cancel your registration, you will be th this conference.
or lodging and you fail to attend or give yourself adequate time to required to refund the McNair program for all costs associated with Signature of Student:	r your registration fee, transportation, cancel your registration, you will be th this conference. Date:
By signing this document, you acknowledge that if McNair pays for lodging and you fail to attend or give yourself adequate time to required to refund the McNair program for all costs associated with Signature of Student: Signature of Mentor: Signature of McNair Staff:	r your registration fee, transportation, cancel your registration, you will be th this conference. Date: Date:
or lodging and you fail to attend or give yourself adequate time to required to refund the McNair program for all costs associated with Signature of Student:	r your registration fee, transportation, cancel your registration, you will be th this conference. Date: Date: