

**MI ASM Student Travel Grant
Application Form**

APPLICANT INFORMATION			
Name			
College/University			
Year in Program (Check all boxes that apply)	<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate	
	<input type="checkbox"/> Freshman	<input type="checkbox"/> Masters	<input type="checkbox"/> PhD
	<input type="checkbox"/> Sophomore	<input type="checkbox"/> 1 st year	
	<input type="checkbox"/> Junior	<input type="checkbox"/> 2 nd year	
	<input type="checkbox"/> Senior	<input type="checkbox"/> 3 rd year or later	
Major/Degree Program			
GPA			
SCIENTIFIC MEETING INFORMATION			
Name of scientific meeting			
Location			
Dates			
Research Presentation Title			
Has an abstract already been submitted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Will the applicant be listed as the presenting author?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	