

# Blake K. Scanlon Applied Learning Presentation Grant Application

Name:

G#:

Address:

Phone:

Email:

Major:

- Undergraduate  
 Full-time (12 hours or more)

- Graduate  
 Part-time (less than 12 hours)

Organization:

Office held:

Conference/Event Name:

Conference Participation:

- Presenting       Participating       Attending       Other \_\_\_\_\_

Name of your presentation (if applicable):

Event Date(s):

Event Location:

Conference Website:

List other students or faculty traveling with you:

**Budget of Expenses:**

Dates of Travel						Totals
Your Hotel Cost (circle one) Total in room: 1 2 3 4						
Your Gas Cost (circle one) Total in car: 1 2 3 4						
Cab/Uber/Bus Cost						
Parking Cost						
Airline/Train Cost						
Registration Fee						
Meal Cost						
Other						
<b>Total amount of request \$</b>						

*Meals: Maximum of \$10 breakfast, \$10 lunch, \$20 dinner*

*Hotel, Gas and Parking: Indicate your individual amount. If your hotel is \$150 including tax and you are sharing with two other people, circle #3 and put down \$50 for each night.*

*Other: indicate the expense item and the cost*

Other sources of funding:

Amount of other funding:

Signature and Printed Name of Student \_\_\_\_\_

Signature and Printed Name of Dept. Chair \_\_\_\_\_

**Remember to fill out the second page!**

**If presenting or performing, give a brief abstract of your presentation or overview of your performance. *If you are presenting a paper, please attach a copy of the call for papers as well as the acceptance letter for the presentation.***

**How will participating in this event help you as a student and in your field?**

**Please provide any additional details needed for the selection committee to understand this event and/or your financial request.**

# **Blake K. Scanlon Applied Learning Presentation Grant Fund Application Check List**

## **I have included the following to make my application complete:**

- \_\_\_\_\_ **Completed and Signed Application**
- \_\_\_\_\_ **Budget of Expenses**
- \_\_\_\_\_ **Department Chair Signature**
- \_\_\_\_\_ **Faculty Support Letter**
- \_\_\_\_\_ **Call for Paper and Acceptance of Paper (if applicable)**

## **Submit to:**

**Missouri Western State University Foundation  
4525 Downs Dr, Spratt Hall 111  
Saint Joseph, MO 64507**

## **Deadlines:**

Fall requests should be submitted no later than the **third Friday in October**.  
Spring requests should be submitted no later than the **third Friday in February**.

## **Reimbursement Process (if approved for funding):**

- Expenses are paid on a reimbursement basis only. This is to ensure that the student uses the funds appropriately.
- Mileage – Reimbursement will be at the appropriate mileage rate that is set by the University each year. Mileage is to be computed over the most commonly traveled (i.e. shortest route) route. A map will be required for reimbursement.
- Original detailed receipts, travel reimbursement Form, accountability report, and thank you must be turned in to the Foundation Office located in Spratt Hall 111 within a month of returning from your conference.
- Once the receipts are reviewed, a check will be issued to the student.
- Students will receive a notification to the email listed on their application when their check is ready for pick up in Leah Spratt Hall, Room 110.