

## CNU Student Activity Fee Conference Fund Application

Applications must be received in the Office of Student Activities on or before the deadline. Post marks will not be honored. Faxes are not acceptable. **Applications received after the deadline will not be considered.**

Name (please print) \_\_\_\_\_ Student ID # \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Major/Minor \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email Address \_\_\_\_\_ Contact number \_\_\_\_\_  
List the department/organization affiliated with this conference \_\_\_\_\_  
Name of the conference \_\_\_\_\_  
Purpose of conference \_\_\_\_\_  
Dates of the conference \_\_\_\_\_ to \_\_\_\_\_ Location (include city, state, country) \_\_\_\_\_  
Web site to view additional conference information \_\_\_\_\_  
Are other CNU students, faculty/staff attending this conference too?    Yes    No    **If yes, please complete Part II on back.**

The Conference Fund provides financial assistance to current, full-time CNU students eligible under the guidelines set forth. The purpose is to provide financial support to reduce the student's expenses, but can not provide full-funding for conference activity. **Please review the conference fund policies attached before completing this form. If applying as an invited speaker, please submit a copy of your invitation. If applying as an accepted presenter, but have not yet received confirmation, please submit a copy of your application and forward your acceptance letter as soon as possible.**

**Check one**

**Eligibility Category**

- Invited Speaker (\$400 max)
- Accepted Presenter (\$300 max)
- University Representative (\$200 max)\*\*
- Individual Interest (\$100 max)

\*\* Complete Part III on the back of this application

**Check one – notice the corresponding deadline**

**Travel Period**

- September 15-Nov. 30
- Dec. 1-Feb. 28/29
- March 1-May 31
- June 1-Sept.14

**Deadline to apply**

- September 1
- November 1
- February 1
- April 19

**Estimated Total Expenses:**

Registration Fee \$ \_\_\_\_\_  
Transportation \$ \_\_\_\_\_  
Lodging \$ \_\_\_\_\_

**Attach a copy of the registration form listing fees**

Method of travel \_\_\_\_\_  
Accommodations at \_\_\_\_\_

Are you receiving other financial assistance (including personal contribution) in order to attend conference? (circle) Yes    No  
If yes, please attach a sheet listing additional funding. Include source (department, student organization, outside agency, personal finances, family contributions, etc.) amount and what part of the travel is it covering (transportation, hotel, registration, etc.). Additional sources of funding also includes travel advances, payments via department charge, scholarships, reimbursements, etc.

I certify that I meet all the eligibility requirements to apply for funding according to the Student Activity Fee Conference Fund guidelines and give the Office of Student Activities permission to verify my academic standing with the registrar's office.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**In order to receive full consideration from grant committee, the follow attachments required:**

- Copy of the registration form or registration information for conference showing dates, location, fees.
- Copy of general overview of the conference, educational sessions, etc.
- Copy of the hotel/lodging information showing location and fees.
- Copy of your invitation as a speaker (if applying for invited speaker category)
- Copy of your presenters acceptance (if applying for accepted presenter category)
- Copy of additional funding (if applicable)

Part II.

Please list the full names of the other students and faculty/staff attending the conference. Indicate if they are a student, faculty or staff.

Full Name	Student, Faculty/Staff

Part III.

If you are applying for University Representative, please complete the following section:

Please list the student organization or department you are representing: \_\_\_\_\_

Please list why you were selected to represent CNU at this conference: \_\_\_\_\_

Please have your club president or department chair\* sign off acknowledging your request:

\_\_\_\_\_  
Signature of Club President/Dept. Chair

\_\_\_\_\_  
Date

\*If the conference is related to a class, you may have your professor sign this form instead of the department chair.