



Medical College of Wisconsin
Graduate School of Biomedical Sciences

GRADUATE SCHOOL

Graduate Student Conference Education Fund Award Application

Today's Date: _____

Applicant Name: _____
LAST FIRST MIDDLE

Degree-Granting Department: _____

Degree Being Pursued: _____ Expected Graduation Date: _____

Name of Faculty Sponsor and Department of Primary Appointment: _____

Length of time spent by student on this research project: _____

Meeting Title: _____

Location of Meeting: _____

Dates of Meeting: _____

Conference is: REGIONAL (for National Society) NATIONAL INTERNATIONAL VIRTUAL

Abstract Title: _____

Authors (in order): _____

It is a requirement that the student applicant is the first author. If the student is NOT the first author, please justify:

Faculty Sponsor: Comment on the student's contribution to the research project and why student is eligible for the award:

REQUIRED SIGNATURES

APPLICANT: _____ PROGRAM DIRECTOR: _____

ADVISOR: _____ DEPARTMENT ADMINISTRATOR: _____

PLEASE PROVIDE THE FOLLOWING WITH THIS APPLICATION:

- ⇒ Abstract showing you are the first author
- ⇒ Evidence of abstract acceptance for presentation at the meeting

Scan and email required documents to the Graduate School (gradschool@mcw.edu) prior to attending the conference or by December 1st (whichever comes earlier).