

Application for MPB Travel Award Funds

Date of Application: _____

Student : _____ Preceptor: _____

Year of Entry into MPB: _____ Passed Qualifying Exam: Yes No

Event / Location of Travel: _____

Travel Dates: _____ to _____

Purpose for Travel: Poster Presentation Oral Presentation Learning new skill

If learning new skill, please briefly describe the benefit of receiving this special training:

Have you received a Travel Award from MPB before? (If yes, you are ineligible for another MPB Travel Award.)
Yes No

Amount Requested: \$_____ (\$750 limit)

After you and your Preceptor sign and date below, please route this form to a member of the Travel Award Committee and either the MPB Chair or Vice-Chair for their electronic signatures. Once all signatures are secured, please submit this form to Bobbi Stidham (bobbi.stidham@vanderbilt.edu).

NOTE: Please attach a copy of the abstract you are presenting with this application.

Signatures:

Student

Date

Travel Award Committee Member

Date

Preceptor

Date

For Office Use:

Seminar Attendance Requirement Met: Yes No

Amount Awarded: \$_____ Funding Source: Park Corbin / Francis

Date of Award: _____ Actual Expenditure Amount: \$_____