



## DEPARTMENT OF PSYCHOLOGY

### Graduate Student Conference Presentation Award Program

**Purpose:** To provide a \$500 award to all department graduate students to help defray the cost of poster presentations, abstract submission fees, travel, and other costs associated with their conference presentation not funded by other university and/or grant funds. The total amount of funding, including this award, cannot exceed the total of conference-related expenses.

**Eligibility and Frequency:** All enrolled Psychology Department graduate students in good standing are eligible to apply for this award for one conference per fiscal year (July through June).

**Nature of Award:** GSCP awards are processed through Financial Aid. As long as you have a zero balance due on your student fees you will receive the disbursement shortly after we have processed the award. If you have signed up to receive direct deposit as an employee or with student financial aid, these funds will be sent directly to your bank account. Otherwise, a check will be issued to you from Student Financial Aid.

**To Apply for the Award:** Complete this application **as soon as you know** you will be presenting at a conference. You will need to obtain your advisor’s signature and submit the supporting documentation (typically the acceptance email or page in program of your presentation) to the department’s main office (PS 225) at least 3 weeks prior to the conference.

*\*NOTE: Most awards are approved within 10 business days. If you do not receive an email from [psych.fiscal@osu.edu](mailto:psych.fiscal@osu.edu) within 10 business days of submitting your application, please contact the Main Office.*

AWARD APPLICATION	
Name:	
Are you paid by the University? <input type="checkbox"/> YES <input type="checkbox"/> NO	Student/Employee ID #: <i>(8 or 9 digit number from your BUCK-ID or pay stub)</i>
Financial Need	Have you demonstrated financial need and completed a FAFSA form? <input type="checkbox"/> YES <input type="checkbox"/> NO
Citizenship status	<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Resident Alien or permanent resident <input type="checkbox"/> Nonresident Alien
Email Address:	
Advisor name:	
Phone Number:	
Home Address:	
Name of Conference:	
Location (City, State):	
Dates of Conference:	
Title of Presentation:	
SIGNATURES	

Graduate Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fiscal Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**For office use only:** Received: \_\_\_ / \_\_\_ / \_\_\_ AA: \_\_\_\_\_ T# \_\_\_\_\_ Emailed: \_\_\_ / \_\_\_ / \_\_\_ Initials: \_\_\_\_\_