

HOLZ-CONNOR TRAVEL GRANT

APPLICATION FORM

Applicant's: Name _____

Department _____

University _____

Address _____

Telephone _____

E-mail _____

Faculty Sponsor _____

Title of paper to be presented: _____

Estimated cost of travel to and from ISOP meeting:

transportation \$ _____

lodging \$ _____

food \$ _____

total \$ _____

Attach a copy of the abstract of your presentation and a short (1-paragraph) description of the significance of your work.

Submit the (1) completed form, (2) abstract, (3) one-paragraph description of your work, and (4) supporting letter from your sponsor (download from website) **by e-mail or fax no later than MARCH 31, 2009** to:

Dr. Andrew Rogerson, Chair—Awards Committee

e-mail: arogerson@csufresno.edu fax: (559) 278-7139