# Student Research & Travel Application

Associated Students Incorporated (ASI) and Instructionally Related Programs (IRP) support the educational aspirations of CSUSB students and have made funding available to support research and travel related to academic growth and development. Increasingly students are seeking financial support for research and travel related to research, so the application process is **very competitive**. We strongly encourage you to thoroughly read each page of the application. We appreciate your interest in funding and look forward to helping you achieve your academic goals.

The ASI grant review committee is made up of one faculty member from each college with one undergraduate student and one graduate student. The Undergraduate and Graduate Deans are ex-efficio. The IRP grant review committee is made up of a faculty member from each college.

For students interested in scholarships for study abroad, please visit the Center for International Studies and Programs and/or the Department of World Languages and Literatures for opportunities.

#### The application funds the following:

- Research Supplies for an independent study, academic course, or honor's project
- Presenting at a conference
- · Attending a conference
- Travel related to research

## <u>2016 – 2017 Application Deadlines:</u>

Sunday, October 23, 2016 Sunday, February 19, 2017 Thursday, April 27, 2017

# <u>Information for Students and Faculty Sponsors (please read before applying)</u>

This list reflects the criteria used by the committee to divide limited funding among large numbers of qualified student requests.

- The committee takes into consideration previous and other sources of funding received by the student as well as the amount requested when deciding if a request will be funded and how much will be funded to each student.
- Students who receive funds <u>must</u> present at the next Student Research Symposium and are encouraged to submit research papers and creative works to the Journal of Student Research.
- Requests should be for research or travel related to a research based academic course, i.e., research for an independent study course, honor's project or thesis. Travel overseas is only considered when it is research related.
- Any study abroad request <u>must</u> include a research component, which must be clearly described. Request will not be funded for an educational experience or class activity. This program will not fund tuition cost.
- There are no guarantees that any request or project will be funded, whether it has a history of previous support or not.
- The maximum award amount is \$1,000 per application. A limit of \$1,000 will be awarded to a student per academic year. **There are no guarantees** that the full amount requested by a student will be funded.
- One application per person per course/conference or trip. If you worked on a project with another person you each must fill out a separate application.
- There is no limit to the number of requests submitted during an academic year, but the number of times a student has received funding is taken into consideration.
- Applicant must be enrolled during the quarter in which they are applying for funding.
   Students must be enrolled in the course they are conducting research for at the time they submit an application.
- Applicant must be in good academic standing. Undergraduate students must have a minimum 2.5 GPA; graduates must have a 3.0 gpa.
- The committee prioritizes the applications with students presenting at a conference having
  first priority, followed by those conducting research, then attending a conference, and last
  priority given to study abroad and other special request that fall outside the categories.
- The funds are distributed as equitably as possible, (e.g. we try to give the same amount to students presenting at the same conference.

The application to be turned into the committee begins on page 1 (shown on the bottom center of the page). The application is to remain in the page order listed below (and is currently in). Deviation from this format listed below makes the application incomplete and in turn will not be submitted to the committee for review. Any information required for the application not attached will make the application incomplete and will not be submitted to the committee for review.

# <u>Applicants must submit a complete application and supporting documentation.</u> Application check list:

Page 1	Student Application Cover Page (Must be signed by faculty sponsor)
Page 2	CSUSB Faculty Member Letter of Recommendation Cover page
Page 3	CSUSB Faculty Member Letter of Recommendation (must be on letterhead and signed by faculty sponsor).
Page 4-5	Grant Proposal (This section should be no more than two pages)
Page 6	Additional Funding Page (MUST be signed by faculty sponsor)
Page 7	Budget Page
Page 8	Supporting Documentation (See Grant Proposal Guidelines)
Page 9	Report and all receipts (These will only be attached if completing the application for reimbursement)

It is recommended that you give your faculty sponsor at least a week to review your application

#### **FUNDING PROCEDURES**

Notification of your award amount will be indicated in a letter sent to your CSUSB email within **four to six weeks** following the application deadline.

Students who have been approved for funding will receive funding in one of two ways:

#### RESEARCH:

Your research funds will be administered by your department and will be available for your use within two weeks of your award letter. Your department and faculty advisor will be responsible for the use and disbursement of the money awarded to you. Funds must be used by May 31, 2017. Any unused funds will be forfeited after this date.

#### TRAVEL:

Students awarded funds to travel will not receive an advance. You are expected to pay out of pocket for your expenses. Travel reimbursements will only be issued after original receipts and a follow up report have been submitted.

Please submit all your receipts and report within 5 business days following your travel dates. To expedite the process please make sure to submit all original and valid receipts. Any unused funds will be forfeited after the 5th day.

\*Any international travel must provide proof of travel insurance

http://riskmanagement.csusb.edu/internationalTravelInsurance.html

#### **Attention Students Requesting Travel Reimbursement.**

A valid receipt must indicate payment was received and INCLUDE:

- Name of vendor from whom services were obtained.
- The date to confirm the expenses occurred during the trip.
- An itemization of charges
- Must indicate charged, show a credit, or be marked paid in full or include a copy of credit card statement
- If marked paid in full, it must have a company representative signature and printed name

Receipts should not be altered.
A PAID stamp is not acceptable.
Tape small receipts to an 8 ½ x 11 paper

Per CSU Travel Policy

## **Budget Information for each category**

#### **Research Funding: Potentially Covered items**

- -Supplies: Disposable supplies (chemicals, reagents) services, survey instruments, and research animals
- -Travel related to <u>research</u> (collecting data). Travel by car is allotted \$0.57.5 per mile. Mileage is determined from the campus to the destination, unless the student lives closer to the destination. Each destination should be listed separately by name. A map showing the mileage must be attached. Students must submit a copy of their Defensive Driving Card (student can obtain a card by completing the course through parking services

http://parking.csusb.edu/Services/defensiveDriving.html ).

Airfare and hotel when found appropriate for conducting research.

- -Bulk mailing (more than 200 of the same pieces) is encouraged when possible, and funding requests for 1st class postage must be justified.
- -Reproduction costs are funded at \$0.04 per page

#### **Travel Funding: Potentially Covered items**

#### CONFERENCE:

When a number of students are presenting or attending the same conference, it is best for students to share their travel plans so that the cost for travel, hotel, etc., are consistent.

#### A. Presenting at a Conference:

- Lodging/hotel: <u>It is expected that students share their hotel room with fellow presenters.</u>
  <u>Hotel cost should not exceed \$195.00 per night.</u> Per CSU travel policy, booking travel packages is not advisable and will preclude reimbursement.
- -Transportation: Airfare or mileage (travel by car) Mileage is reimbursed at \$0.57.5 per mile. Mileage is determined from the campus to the destination, unless student lives closer to the destination. Each destination should be listed separately by name. A map showing the mileage must be attached. If the student is unable to travel using the least expensive option the committee must pre-approve the travel arrangements prior to the trip.
- -Reproduction costs are funded at \$0.04 per page

#### B. Attending a Conference:

-Students attending a conference will only be funded the conference registration fees.

#### **Expenses that are NOT funded include:**

- -Food
- -Any equipment (laptops, computers, etc.)
- -The purchase of software or subscriptions to journals
- Internet access, movies, room service, gym, fees for flight changes or upgrades of any sort.
- -Single room occupancy (It is expected that students will share rooms—this should be indicated with the "hotel" information)
- -Accommodations at the conference hotel (if less expensive hotels are nearby)
- -Child care
- Mileage to and from the airport
- -The cost of gasoline (This is already included in the per mile reimbursement)
- -The cost of a rental car
- Phone cards
- -Passports/Visa Fees
- -Transportation within destination

Deadline:	
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# STUDENT RESEARCH AND TRAVEL APPLICATION

Type ONLY

te Coyote ID#						
Name						
Address						
City	State_			Zip		
Phone ()	CSUSB E-Mail _			@coyote.csusb.edu		
Currently I am enrolled in (circle one):	ВА	BS	MA	MS		
Major	Department: _					
Overall GPA: Class Level: _		Ethnici	ty			
Travel to att	esent at a conferer end a conference nduct Research ain briefly)					
I understand that:  It is not guaranteed that my project or an empty of the submitted to the committee for review of the application will be sent out 4 to the submitted to the	the committee for reation that is not attacew (initial)	eview if it is r ched will ma	not in the prop ke my applica			
Please have your CSUSB faculty spon	sor sign below to i	ndicate tha	t they have	read your application:		
Faculty Sponsor Signature						
Print Name			Departmen	ut		

Return a complete application packet to the Office of Graduate Studies and the Office of Student Research CH-123.

#### STUDENT RESEARCH AND TRAVEL

#### CSUSB FACULTY LETTER OF RECOMMENDATION COVER PAGE

Please type

Date	
Name of CSUSB Facul	ty Sponsor
Name of Student Recor	mmended
Funds requested for:	Research Supplies for (class name & #) Travel to present at a conference Travel to attend a conference Travel to conduct Research Other (explain briefly)

## **Faculty Sponsor:**

Please write a letter explaining to the committee

- Need for support
- Quality of the student's work
- Significance of the project
- How the project fits into the student's academic and professional development
- Other information about the student and this project that will be helpful to the committee in making its decision.

Return your original letter signed and on letterhead to the student, so that they can complete their application. <u>The letter will be inserted after this page and be considered as page 3.</u>

#### STUDENT RESEARCH AND TRAVEL

#### RESEARCH GRANT PROPOSAL GUIDELINES

This section should be no more than two TYPED pages.

- I. Introduction of Project
  - a. Summarize the purpose of your research
- **II.** Personal Statement: Justifies why your project should be funded. Present your case clearly (avoid jargon) as members of the committee may not be familiar with your field of study.
  - a. Purpose of the work (and/or hypothesis)
  - b. Describe the importance and relevance of your project
  - c. How will you benefit from this project?
  - d. How does this project fit into your future academic plans?
  - e. What will your department and school gain from your project?
  - f. What is the project's relationship to your other professional/academic activities?
- **III.** Materials and Methods (Explains the feasibility of your proposal and justifies the materials for which you have requested funding)
  - a. Explain the activities to be conducted (methods and procedures)
  - b. Explain how the activities you have designed will accomplish your objectives
  - c. If relevant, explain how you will analyze your data
- **IV.** Analysis of Outcome (Shows your abilities as an investigator and how well you plan your research)
  - a. Describe how you will analyze your results

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- b. What does it mean if you receive unexpected results?
- c. What does it mean if you receive the expected results?
- d. What future work will or can be done based upon your results (results expected and not expected)?

#### **Supporting Documentation** (IRB APPROVAL MEMO MUST BE ATTACHED AT THE END OF APPLICATION)

Compliance Committee Approval		
Does your project involve:		
Human Subjects	Yes □	No
Animal Subjects		
Radioactive Materials		
Recombinant DNA		

If yes, Contact Michael Gillespie in Academic Research at (909) 537-7588, FB-108, to obtain a copy of your approval memo (approval may be pending). Attach your approval memo to this application.

# TRAVEL TO <u>PRESENT</u> AT A CONFERENCE GRANT PROPOSAL GUIDELINES

This section should be no more than 2 TYPED pages.

- **I.** Introduction of the Project
  - a. Provide a brief description of your research.
  - b. Summarize the purpose of your research, methods, employed, results obtained and significance of the work.
- **II.** Personal Statement: Justifies why your request should be funded. Present your case clearly (avoid jargon) as members of the committee may not be familiar with your field of study.
  - a. Purpose of the work (and/or hypotheses)
  - b. Describe the importance and relevance of your project and presenting at this conference.
  - c. How will you benefit from presenting your project at this conference?
  - d. How does this project fit into your future academic plans?
  - e. What will your department and school gain from your project?
  - f. What is the project's relationship to your other professional/academic activities?

#### III. Methods

- a. Describe briefly, the activities conducted to obtain the results of your research
- **IV.** Presentation of Results (Demonstrates how you intend to present your work at the conference)
  - a. Clearly and simply explain the presentation of your research. Figures and graphs are allowed.
  - b. If several authors are listed for a presentation, each author requesting funds should clearly describe what his or her participation will involve.

## **Supporting Documentation** (MUST BE ATTACHED AT THE END OF APPLICATION)

Students must include a written confirmation of acceptance from the conference referees

- a. A confirmation/acceptance letter or
- b. A copy of the program with your name and presentation title

The greater the student's participation in the conference presentation, the more competitive the application will appear to the committee members. Thus, a first author will be given preference over a second author, etc., unless there is a good reason why this is not equitable.

# TRAVEL TO ATTEND A CONFERENCE GRANT PROPOSAL GUIDELINES

This section should be no more than 2 TYPED pages.

Personal Statement: Justifies why your request should be funded. Present your case clearly (avoid jargon) as members of the committee may not be familiar with your field of study.

- a. Purpose of the conference (and/or hypothesis)
- b. How will you benefit from this conference?
- c. How does attending this conference fit into your future academic plans?
- d. What will your department and school gain from your attendance?
- e. What is the conference's relationship to your other professional/academic activities?

## **Supporting Documentation** (Must be attached at the end of application)

Students must submit written confirmation of paid acceptance from the conference referees including:

- a. A confirmation letter and EITHER
- b. A copy of the conference registration form OR
- c. A copy of the conference announcement/bulletin

#### **ADDITIONAL FUNDING PAGE**

Please Type

Amount Requested | Amount Awarded

Students who are requesting ASI/IRP funding must inform the committee of <u>any additional</u> <u>funding</u> they are applying for or have received pertaining to this request. <u>This page must be included and signed whether or not you are receiving additional funds.</u>

Please list any additional funding/requests below:

Entity Requested Funds From

	1.			
	2.			
	3.			
	4.			
	5.			
	Tota	al Amounts:		
Revi	iew" you h iirst lir	ve not received notification on the amoun ave not applied for any additional funding ne	g (other than this request) -	
		Stude	nt Signature	Date
		Facul	ry Sponsor Signature	Date

## **Budget Page**

Please enter your budget information in the appropriate column. <u>Please limit your amount to no more than the maximum allowed.</u> In detail, please justify your requested amounts (attach a separate page if needed). The committee will review this section to assess need.

**FACULTY SPONSOR**: I certify that I have reviewed the student budget and certify it is complete and appropriate for the request.

Faculty Sponsor Signature

	Research Supplies	Present	Attend	Research Travel	<u>Other</u>	Additional Information or Justification
Conference Registration fee:	NA			NA		Conference Name: Conference Dates: Conference Location:
Airfare:						
Mileage (\$0.54 per mile):  *Include map demonstrating mileage amount  *Copy of your Defensive Driving card						Required if claiming mileage Car Insurance Company:  Driver's License # License Plate#:  Carpooling with:
Airport shuttle/Taxi :						
Lodging/Hotel: Amount should reflect individual student expense						Room shared with: Individual expense per night \$
Other (Please describe):						
Research Supplies: (Please list items below)						Indicate purpose of supplies
a.						
b.						
C.						
d.						
Total Budget Requested:  ***Amount should not exceed the \$1,000.00 limit. ****						

#### **FOLLOW-UP REPORT GUIDELINES**

The report should be at least one TYPED page in length and have receipts attached.

## **Research Format**

- I. Introduction
  - a. Title of project
  - b. Provide a brief description of your research
    - i. Summarize the purpose of your research, methods employed, results obtained and significance of the work.
- II. Analysis of Outcome
  - a. How did you benefit from this project?
  - b. Analyze and interpret the results obtained
    - i. Were the results expected, and why?
    - ii. Were the results not expected, and why?
  - c. What future work will or can be done based upon your results

## **Travel Format (Conferences)**

- I. Introduction
  - a. Name of conference attended/presented at
  - b. Provide a brief description of the organization who is hosting the conference
    - i. Provide a brief description of what you expected to gain by attending/presenting at the conference
- II. Experience Gained
  - a. What educational and/or professional benefits did you gain from attending/presenting at the conference?
  - b. Would you recommend other students in your discipline to attend/present at this conference?



#### Department of Risk Management

#### Dear Student:

You are currently participating in a California State University-affiliated program which requires air and/or ground transportation.

Air and ground travel involves risks and could result in damage to property, injury to persons, and death. Please be informed that the California State University assumes no liability for damage, injury, and death which may occur during air and/or ground travel required by the California State University-affiliated programs. Your participation in the program is voluntary, and you participate at your own risk.

Prior to undertaking a CSU-affiliated air and/or ground travel, you will be required to sign a "Release, Hold-Harmless and Informed Consent" statement. Please review the statement carefully before signing it.

Signature of Chancellor/President or Designee

909.537.3937 • http://riskmanagement.csusb.edu 5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393



#### Department of Risk Management

# RELEASE OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND AGREEMENT TO PAY CLAIMS

Activity:		
Activity Date(s) and Time(s):		
Activity Location(s):		

In consideration for being allowed to participate in this Activity, on behalf of myself and my next of kin, heirs and representatives, I release from all liability and promise not to sue the State of California, the Trustees of The California State University, California State University, San Bernardino and their employees, officers, directors, volunteers and agents (collectively "University") from any and all claims, including claims of the University's negligence, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my participation in this Activity, including travel to, from and during the Activity.

I am voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity, including travel to, from and during the Activity.

I agree to **hold** the University **harmless** from any and all claims, including attorney's fees or damage to my personal property that may occur as a result of my participation in this Activity, including travel to, from and during the Activity. If the University incurs any of these types of expenses, I agree to reimburse the University. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

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I am 18 years or older. I understand the legal consequences of signing this document, including (a) releasing the University from all liability, (b) promising not to sue the University, (c) and assuming all risks of participating in this Activity, including travel to, from and during the Activity.

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me. Participant Signature: \_\_\_\_\_ Participant Name (print):\_\_\_\_\_\_ Date: \_\_\_\_\_ If Participant is under 18 years of age: I am the parent or legal guardian of the Participant. I understand the legal consequences of signing this document, including (a) releasing the University from all liability on my and the Participant's behalf, (b) promising not to sue on my and the Participant's behalf, (c) and assuming all risks of the Participant's participation in this Activity, including travel to, from and during the Activity. I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document. I have read this two-page document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me. Signature of Minor Participant's Parent/Guardian Name of Minor Participant's Parent/Guardian (print) Date

Minor Participant's Name



#### Department of Risk Management

# Student Travel Participant and Emergency Contact List (Please Fax to University Police x77022)

Department:

College:

Activity Description/Title:		
<u>Begins</u>		
Date: 1	Гіme:	Location:
<u>Ends</u>		
Date: 1	Гіme:	Location:
Emergency Contact (Faculty/S	taff):	
College/Department Designate	ed as Responsible Party	
Name:	Phone	2:
	Participant List	
Participant Name	Emergency Contact	Area Code and
	(Name/Relationship)	Phone Number

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