



## THE SOCIETY FOR ORGANIC PETROLOGY STUDENT TRAVEL AWARD

### ***PURPOSE***

The Student Travel Award is designed to support student attendance at the annual TSOP meetings.

### ***ELIGIBILITY***

The Student Travel Award is open to students who have submitted an abstract for presentation (either an oral or poster) at the annual TSOP meeting. The abstract has to be accepted for presentation.

### ***AWARDS***

Four monetary awards of \$750 (US) each will be granted. Money will be sent to the awardees before the TSOP Annual Meeting.

### ***APPLICATION DEADLINE***

Applications must be e-mailed by **June 5, 2017** to be considered for the upcoming TSOP meeting. The completed application should be sent electronically to Rachel Walker at: [drrachelwalker@gmail.com](mailto:drrachelwalker@gmail.com)

### ***COMPLETED APPLICATIONS SHOULD INCLUDE:***

- 1) Filled out Application Form (see page 2).
- 2) Title, authors and text of your abstract submitted to the TSOP Annual meeting (paste on page 2-3).
- 3) Cover letter requesting travel funds and stating how attending the TSOP Annual meeting will help your research (paste on page 4).
- 4) Letter of support from your primary faculty advisor (attach as separate document).

### ***SELECTION***

Applications will be reviewed and ranked by a committee of three TSOP members; selection of award winners will be based on a combination of quality of research/presentation and potential impact in the field of organic petrology.

### ***CONDITIONS***

Monetary awards are to be applied to expenses directly related to travel to attend a TSOP Annual Meeting. Funds should not be used to fund research, purchase capital equipment, to pay salaries, tuition, room, or board during the school year. **Students receiving the award will be required to provide receipts detailing travel spending to TSOP after the meeting has concluded.** Copies of travel receipts should be sent to Rachel Walker at: [drrachelwalker@gmail.com](mailto:drrachelwalker@gmail.com)

## TSOP STUDENT TRAVEL AWARD APPLICATION FORM

Family Name:	
Given Name(s):	
Name of your university:	
Your department:	
Address of your university:	
Degree now being sought:	
Name of your advisor:	
Telephone number:	
E-mail address:	

### ABSTRACT

Title of your abstract submitted to the TSOP Annual Meeting:	
Abstract authors:	

Paste the abstract text below:

**COVER LETTER**