

KAGES Student Travel Award Application

Respond to every section; if the answer is "none" or "not applicable," type this in the space provided. Delete extra line spaces wherever necessary to maintain a 1-page format. Send as an e-mail attachment to support@kages.org.

I. PERSONAL INFORMATION (Please PRINT or TYPE)

NAME: Last: _____ First: _____

MAILING ADDRESS: _____

EMAIL: _____ PHONE: _____

INSTITUTIONAL AFFILIATION: _____

FIELD OF STUDY: _____

Degree Being Pursued (check one)

Current Academic Support (check one)

Citizenship (check one)

___ Doctorate

___ Research Asst.

___ U.S. Citizen

___ Master's

___ Teaching Asst.

___ Korean

___ Bachelor's

___ Fellowship

___ Other

___ Other (_____)

___ Other (_____)

(_____)

KAGES membership since: _____

Membership continued? Yes () No () Why? _____

II. BUDGET

Amount

Travel: _____

Lodging: _____

Registration Fees: _____

Other _____: _____

Budget Total: _____

III. SOURCES OF FUNDS

Requested from the Awards Program: _____

Matching Funds (specify): _____

Source _____: _____

_____: _____

Personal Contributions: _____

Total (must match Budget Total above): _____