

Emergency Student Fund Application

from Social Work Student Support Fund

Name: _____ UT EID: _____

Home Phone: _____ Work/Field Phone: _____

E-mail: _____ Amount Requested (up to \$300): \$ _____

Academic Program: BSW MSSW Ph.D. Year (1st, 2nd, etc.): _____

Are you currently employed at UT? AI/TA GA/GRA Hourly

Please check only one: Emergency Scholarship Professional Development

You need to be registered at the time you submit this request.

FOR EMERGENCY SCHOLARSHIPS ONLY If you have financial aid, you will need to contact your financial aid counselor. UT's Office of Financial Aid will not release this check until that is cleared. Please provide a brief description of nature of this emergency.

FOR PROFESSIONAL DEVELOPMENT ONLY A student can receive a professional development grant from these funds only once during a degree program. Please complete the following information:		
Title of Conference: _____		
Conference Location: _____	Date of Presentation: _____	
Title of Your Accepted Presentation: _____		
List Any Co-Presenters: _____		
Will you be available to help staff the School's exhibit booth? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Travel: \$ _____	Registration Fee: \$ _____	Lodging: \$ _____
Describe any efforts you are making to minimize costs (sharing hotel room, volunteering with conference, etc.): _____ _____		
<small>(Sponsor verifies that the presentation above has been accepted by the conference and that this opportunity will be a valuable professional development experience for the student.)</small>		
Signature of Faculty Sponsor _____		

Student's Signature: _____ Date of Application: _____

Please submit this form to the Dean's Office. You will be contacted via e-mail as soon as possible with a decision.

Dean's Office Approval: _____
Associate Dean _____ Date _____