Date received:

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| Name | |  | | Student ID Number | | |  |  |  |  |  |  |  |  |  |  |
| Status | | □ Undergraduate student  □ Master’s student  □ Ph.D. student | | Dept./Inst./Program | | |  | | | | | | | | | |
| □ Working full-time;  Employer： \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  □ Unemployed/working part-time | | | | | | | | | | | | |
| Phone Number | | (Office) |  | Highest Level of Education Completed | |  | | | | | | | | | | |
| (Cellular) |  |
| Email Address | |  | | Nature of the Seminar | | □Domestic Seminars  □Domestic International Conferences | | | | | | | | | | |
| Conference Title | |  | | | | | | | | | | | | | | |
| Conference Organizer | |  | | | | | | | | | | | | | | |
| Date of Conference | | From | / /  (mm/dd/yyyy) | | Conference Site | |  | | | | | | | | | |
| To | / /  (mm/dd/yyyy) | |
| Field of the Paper | |  | | | Areas of Academic Expertise | | 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| Title of the Paper | |  | | | | | | | | | | | | | | |
| Type of Presentation | | □ Oral □ Poster □ Other | | | | | | | | | | | | | | |
| * Grant requested: NT$\_\_\_\_\_\_, the University will provide a grant up to NT$1,500. Please state the trip and transportation expenses. For example, roundtrip train expenses between Taipei and Hualien are NT$880. The University will provide the grant. | | | | | | | | | | | | | | | | |
| Required Documents | 1. Photocopy of letter or email of acceptance/invitation for paper presentation at the conference. 2. Abstract of the paper you will present and full paper, which has been completed in Taiwan and has not been published, yet. 3. Conference program and other conference-related documents. | | | | | | | | | | | | | | | |
| Student’s Statement | 1. I am applying for this grant following “TCU Guidelines for Providing Research Related Grants to Students.” I have read it thoroughly, promised to comply with it, and fulfill the obligations set forth. Should any violation occur, I will repay the grant. 2. The data in this application and other documents are accurate and complete. 3. The co-authors have authorized me to publish this paper at the conference. They do not permit the use of this paper to apply for or receive any grant from any organization.   Student’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: | | | | | | | | | | | | | | | |
| Note | Student must apply at two a week before the conference starts. | | | | | | | | | | | | | | | |

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| For Office Use Only | | |
| Faculty Advisor | Department Chair/Institute Director/Program Director | Results |
|  |  | □ Approved □ Denied |
| Office of R&D | Vice President |
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Your rights under the Personal Information Protection Act:

1. To process your application, the University needs to collect and process your name, phone number, student ID number, the highest level of education completed, Email address, etc.
2. If you provide erroneous, inaccurate, out-of-date, or incomplete information, your rights may be negatively affected.
3. If you want to correct your information or exercise other rights provided by Article 3 of the Personal Information Protection Act, you may contact (03)856-5301 ext. 1405 for assistance.