***Medici Circle* Student Conference Attendance/Exhibition Visit Grant Application**

**READ CAREFULLY**

**This form must be completed and hand delivered to Marisa Cline**

**in the main office of the Fine Arts building by September 19th.**

**Note: All students participating as a group must complete this individual form**

**AND submit with the group indication. ALL FORMS MUST BE TYPED**

**Date of application: Month: Day: Year: .**

|  |  |
| --- | --- |
| Name of student |  |
| Major of student |  |
| Minor of student |  |
| Current Academic Rank |  |
| Graduation Date |  |
| Email |  |
| Telephone Number/ Cell and home |  |
| Address |  |
| Name of conference |  |
| Destination of conference |  |
| Date /Dates of Conference |  |
| Cost of registration |  |
| Cost of transportation |  |
| Cost of Lodging (Are you sharing a room? How many to a room?) |  |
| Other sources of income e.g. Clay club |  |
| Total budget amount |  |
| Total amount requested from Medici |  |

**Materials that must be included:**

**\_\_\_\_\_ Flyer announcing the conference/exhibition**

**\_\_\_\_\_ Itinerary of conference/exhibition**

**\_\_\_\_\_ Copy of your registration- each person traveling must include this**

If you are doing this field trip with a group – (e.g., Art Education, Clay Club), work as a group to fill out the information. One member of the group must submit the materials **in red** above. **Every member** **of the group** **MUST fill out the individual student grant application AND the questions on page two.** The answers can all be the same, but each individual going must fill out the grant form with *your name, personal information, and a* copy of the information for the questions. **You must sign the application**.

**Please proceed to the next page and answer the two questions.**

**\*SEE PROCEDURES AND REQUIREMENTS FOR REIMBURSEMENT OF GRANT MONEY AT THE END OF THIS GRANT.**

1. **Describe how these funds would support the enhancement of your student’s artistic development.**
2. **Describe how you would share the results of your experiences in order to communicate with the School of Art and the Medici Circle the value gained as a result of this request.**

**IMPORTANT REIMBURSEMENT INFORMATION, PLEASE REVIEW.**

**Within thirty (30) days of the funded event(s), all individual recipients or group MUST submit a one page report and photos on a flash drive to Marisa Cline in the main office of the Fine Arts building.**

**The brief report describes what you did, how you benefited from the experience, and what value to you could be shared with other students as you return to the School of Art. Both the report and photos are required. The group report should be submitted before individuals from the group may be reimbursed.**

**Award monies will be paid when the report and the photo CD has been verified as above and itemized original receipts (in the recipient’s name) and the grant approval letter is submitted to Jane Steinert in the School of Art main office. Award monies will be forfeited if unclaimed after June 30th of the academic year of the award. Please make a copy of this submission to retain for your records.**

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**THE DEADLINE FOR APPLICATIONS IS SEPTEMBER 19th.**

**All applications must be turned into Marisa Cline in person at the main office of the Fine Arts building.**

**No late applications will be accepted.**