CMCT Travel Awards

The Center for Molecular Carcinogenesis and Toxicology (CMCT) provides travel support for graduate students and postdocs who are presenting original research in related areas. Awards (up to $500) will be provided to eligible applicants each year. The CMCT director, Dr. John DiGiovanni, will review application materials and approve the travel awards.

Eligibility:

Applicants must be enrolled full-time and in good standing in graduate training at The University of Texas at Austin, or assigned to a postdoctoral fellow position. Research papers or posters must already have been accepted for presentation by a recognized conference. Students/postdocs may receive only one travel award per year.

Application Materials:

1) A copy of the abstract of research to be presented
2) Acceptance letter (if appropriate) for the research presentation
3) Completed application form
4) Amount requested

Submit application materials: Michelle Lee
michelle.lee@austin.utexas.edu
(512) 471-2061 (PHR office)
(512) 495-4766 (DPI office)
2409 University, PHR 5.210

Applications will be accepted throughout the year, but should be submitted at least two months before the proposed travel date(s).
Center for Molecular Carcinogenesis and Toxicology
Travel Award Application Form

**Applicant Information (please type or print):**

Name (Last, First, and MI): _________________________EID_________________

Preferred Mailing Address (street address, city, state, ZIP)

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Daytime Telephone Number: ________________________________

Email Address: ______________________________________

Department at UT Austin: ______________________________________

Supervisor: _____________________________________________

Other travel funds available (amount and source): ________________

____________________________________________________________________

Amount Requested: ________________________________

**Conference Information**

Name of Organization or Conference: ___________________________

____________________________________________________________________

Location of conference: _______________________________________

Dates of conference: _________________________________________

**Applicant’s Signature:** ________________________________

Date: _________________________