|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| IEEE NTC Student Travel Fellowship Application Please return this form along with your resume to **nano2017@deepprobing.com** by June 15, 2017 | | | | IEEE NANO 2017 |
| Are you an IEEE Student Member? | YES | NO | If no, please stop here. You are not eligible for the fellowship. | |
| This fellowship, offered by IEEE Nanotechnology Council, will provide accommodation for IEEE student members to attend the 17th IEEE International Conference on Nanotechnology (IEEE NANO 2017), July 25-28, 2017, Pittsburg, USA, for up to five room nights (shared with another student). | | | | |  |

## Applicant Information

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  |  | | |  | Date: |  | |
|  | Last | First | | | M.I. |  |  | |
| Address: |  | | | | | | |  |
|  | Street Address | | | | | | | Apartment/Unit # |
|  |  | | | |  | | |  |
|  | City | | | | State | | | ZIP Code |
| Phone: |  | | Email |  | | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Your gender |  | | Male |  |  | Female |  | |  |  |
| Your student status |  | | Undergraduate Student |  |  | Graduate Student |  | |  |  |
| Your University or Institute: | |  | | | | | |
| Your IEEE Student Member #: | |  | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Are you a citizen or permanent resident of the United States? | | | | | YES | NO |
| Are you willing to be the volunteer of the conference? (The fellowship is merit based. The answer to this question will not affect your application.) | | | | | YES | NO |
| Have you ever been convicted of a felony? | | YES | NO |  | | |
| If yes, explain: |  | | | | | |

## Paper and Registration Information

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Paper ID: |  | | Paper Title: | |  | | |
| Presentation Type: | | Oral;  Poster | | | | Registration Confirmation Number: |  |
| Accommodation Requested: | | | | July 24;  July 25;  July 26;  July 27;  July 28 | | | |

## Advisor Information

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Title: |  |
| Affiliation: |  | Phone: |  |
| Address:: |  | Email: |  |

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to award of the fellowship, I understand that false or misleading information in my application may result in felony charges.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |