

**APPLICATION FOR APA INTERNATIONAL CONFERENCE REGISTRATION GRANT
for APA and APAGS Members**

APPLICATION DEADLINES March 1; June 1; and December 1

This award is to cover or partially cover "Early Bird" Conference Registration Fees up to \$400

PLEASE TYPE OR PRINT CLEARLY

Name																	
APA / APAGS Member Number																	
Department / Institution																	
Mailing Address																	
Telephone																	
Fax																	
E-mail																	
Conference Name																	
Conference Dates																	
Conference Venue: City, Country																	
Early Bird Registration Fee Amount (in local currency and in US dollars)																	
Program Participation (check all that apply); Indicate authorship level in space after program type (e.g., 1 st , 2 nd , 3 rd , etc):	<table border="0"> <tr> <td>TYPE OF PRESENTATION</td> <td>AUTHORSHIP</td> </tr> <tr> <td><input type="checkbox"/> Symposium participant</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Oral Paper</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Poster Symposium</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Poster</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Session Organizer / Chair</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Other (Specify)</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> No Formal Participation</td> <td>_____</td> </tr> </table>	TYPE OF PRESENTATION	AUTHORSHIP	<input type="checkbox"/> Symposium participant	_____	<input type="checkbox"/> Oral Paper	_____	<input type="checkbox"/> Poster Symposium	_____	<input type="checkbox"/> Poster	_____	<input type="checkbox"/> Session Organizer / Chair	_____	<input type="checkbox"/> Other (Specify)	_____	<input type="checkbox"/> No Formal Participation	_____
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Have you attended any psychology conference outside the US in the last two years?	_____ No _____ Yes (specify meeting year and location)																

Please indicate if you are:

Undergraduate Student

Graduate Student

Early Career

Emeritus

SUPPORTING MATERIALS:

Please attach the Conference Announcement with registration fee amounts

Please attach your conference submission or other evidence of participation, if applicable

Please attach notification of your participation / confirmation of participation if available (must be supplied before awarded funds can be disbursed)

Please attach receipt for conference registration, if available

Please attach a letter of support from your Department Chair or Supervisor, indicating whether or not funds are available to you for this international travel

AGREEMENT BETWEEN APA AND APPLICANT

I agree to use the APA grant to cover Conference Registration Fees.

I agree report to APA at once financial support received for Conference Registration and attendance from any source other than APA. (This requirement is intended to ensure that unneeded funds can be distributed to other qualified applicants.)

I agree to notify APA immediately and to return in full any award from APA if I do not attend the Conference for which this application is made.

I agree to submit to APA a written report on my participation and observations at the international conference for which this award is made with the understanding that this report may be included in whole or in part in reports by APA.

I certify that the statements I have made in this application are true.

Signature: _____ Date: _____
(if submitted electronically please type in full name in lieu of signature)

APPLICATION DEADLINES ARE MARCH 1; JUNE 1; AND DECEMBER 1

Electronic submissions:

international @ apa.org with INTERNATIONAL CONFERENCE TRAVEL GRANT in the subject line

Mail submissions:

**OFFICE OF INTERNATIONAL AFFAIRS/INTERNATIONAL CONFERENCE GRANT
AMERICAN PSYCHOLOGICAL ASSOCIATION
750 FIRST STREET, NE
WASHINGTON, DC 20002-4242**