**Alpha Kappa Delta**

**Chapter Representative Research Supplement Travel Grant Application**

**2025-2026 Application**

**Complete applications are due either September 25th, January 31st, or February 28th**

***ESS applications are due no later than January 31st***

**Applications are reviewed shortly after the current deadline.**

**Please type. E-mail to** [**AKD@alphakappadelta.org**](mailto:AKD@alphakappadelta.org)

*Deadlines are the dates in which applications are reviewed*

**\*See Rules and Regulations for more information\***

**AKD will approve up to $500 for a chapter representative accompanying students to a regional meeting who have been approved for AKD Student Member Research Travel Grant funding. Students must be AKD members and must be presenting a paper or poster at a regional sociology meeting.**

*Please note the amount requested may not be what you are approved for as the amount available is prorated based on the number of eligible requests received in the office. Funding is on a first come, first served basis.*

**Section One – Basic Information**

**School:**

**Chapter Name:**

**Chapter Representative:**

**Contact Email Address(es):**

**Section Two – Regional Meeting Information**

**Regional Meeting:**

(AACS, ESS, MSS, MSSA, NCSA, PSA, SSS, and SSSA only)

**Section Three –Budget**

Include the amount requested and for each of the following below (**Note: AKD will not reimburse for food**). Please include any other sources of funding as well:

Hotel:

Airfare:

Mileage:

Other Transportation (taxi, train, parking, etc.):

Registration:

Other sources of funding:

**Total amount requesting:**

\*The amount of the request must not exceed $500

**Section Four – Student(s) Information**

**Number of students accompanying on the trip:**

**Please list the name of each AKD student who you will be accompanying (separated by a comma):**

**The AKD Executive Office will crosscheck all other student information received with the “AKD Student Member Research Travel Grant Application”.**

**NOTE:** If this application is approved, but the students’ (listed above) abstracts are not selected for presentation from the regional society for the conference and you will no longer be traveling, please inform the Executive Office so the funds may be used for other individuals.

**Section Six – Verification**

**Chapter Representative Signature\*\*:**

**Electronic signature is acceptable**

**E-mail:**

**\*\*Applications are accepted only from active chapters and chapter representatives who maintain Voting membership in AKD.**

**SUBMISSION:** Please submit this completed application, your travel release form, and the AKD Student Member Research Travel Grant Application and accompanying materials as email attachments to [AKD@alphakappadelta.org](mailto:AKD@alphakappadelta.org)