



College of Undergraduate Studies High Impact Experiences Stipend Program Application

Personal Information:

Name: _____

UCF Student ID: _____ Degree/Major: _____

UCF Email: _____ Phone: _____

HIE Activity:

Title of HIE Project: _____

Type of Activity (e.g., student research project, conference presentation, summer research training, conference attendance, travel expenses for study away or study abroad trips):

Date(s): _____ to _____

Location: _____

Funding Request:

Total Amount Requested: \$ _____

Budget Breakdown (itemize expenses, e.g., registration fees, travel, accommodation, and materials):

Note: Be sure to consult UCF's Travel Manual for UCF travel procedures and guidelines. Use additional sheets if necessary.

Item Description	Estimated Cost	Justification/Comments

Total: _____

Have you requested funding from other sources: Yes No

Please list all additional funding requested and the status of the request:

Funding Source	Amount of Funds Requested	Status of Request

Purpose and Benefits:

Please provide a brief description of the research/activity and explain how it aligns with your academic and career goals. Describe the potential benefits to your academic and professional development.

Supporting Documents:

Please attach any relevant documents, such as conference acceptance letters, research proposals, travel estimate documents or any other supporting materials.

Faculty Advisor/Supervisor Information:

Name: _____ Email: _____ Phone: _____

Signature: _____

Additional Information/Comments:

Is there any additional information you would like to provide regarding your funding request?

Declaration:

I hereby confirm that the information provided in this application is accurate and complete to the best of my knowledge. I understand that the approval of funding is subject to review and compliance with institutional guidelines.

By submitting the UCF College of Undergraduate Research Program stipend application, you are giving your consent for CUGS to release you student information to appropriate CUGS stipend selection committee members, UCF Foundation, as well as the administration of the CUGS stipend program. This includes, but us not limited to, your application information, GPA, year in school, and major. I have read and agree to the above terms and conditions.

Applicant's Signature: _____ Date: _____

Please submit this completed form and all relevant supporting documents to...

For any inquiries or assistance, please email the College of Undergraduate Studies.

To be filled out by College of Undergraduate Studies Leadership:

The following funding request is: **Approved** **Denied** **Requires Modification**

Signature: _____

Date: _____