



Application Instructions

Office of Undergraduate Research and Creative Activities (URCA) Research Presentation Grant (RPG) Final Report

This report must be submitted through Qualtrics within 4 weeks after the project end date. Please be sure to click the "Submit" button on the last page and save the PDF of your answers for your records.

If you experience any challenges uploading documents to Qualtrics, you may use SecureShare to securely share files with urca@cofc.edu. You may also email urca@cofc.edu with any questions or concerns.

Student Applicant Information

Enter the student name [First and Last]:

Enter the student email address with no spaces before or after the text.

Please confirm your student email address.

Enter the student CofC ID Number:

Mentor Information

Enter the primary faculty mentor applicant's name [First and Last]:

Enter the primary faculty mentor email with no spaces before or

after the text.

Please confirm the primary faculty mentor email address.

Project Information

TITLE OF PRESENTATION

Abstract (250 word limit):

Name, Date, and Location of Conference:

Type of Presentation

- Poster Presentation
- Oral Presentation
- Performance
- Other, please specify

Was the conference within the Student's Discipline?

- Yes
- No
- Other, please specify

Did this experience impact the development of the student, such as by developing proficiency in specific skills?

- Yes
- No

Impact on Student Planning and Development: Please describe the specific skills the student developed and how those

skills will aid them in their future educational and career goals, and how, if at all, this research impacted the student's career plans. (500 word limit)

Final Expense Report:

This should reflect the actual expenses. If you indicated "Other" please specify what the money was used for.

| | RPG Final Expenses | Amount |
|-------------------|----------------------|----------------------|
| A. Registration | <input type="text"/> | <input type="text"/> |
| B. Transportation | <input type="text"/> | <input type="text"/> |
| C. Housing | <input type="text"/> | <input type="text"/> |
| D. Meals | <input type="text"/> | <input type="text"/> |
| E. Other | <input type="text"/> | <input type="text"/> |
| F. Total Costs | <input type="text"/> | <input type="text"/> |

Did you spend the total funds requested?

- Yes
- No

Copy of Travel Reimbursement Form

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