

COLLEGE OF ARTS & SCIENCES STUDENT TRAVEL (CASST) GRANT PROGRAM
 REVIEWER'S FORM FOR CASST APPLICATIONS

Name of Student Applicant:

Project Title:

Date Reviewed:

Reviewer's Name:

REQUIRED ELEMENTS:	Is there a conference registration form (or other evidence) showing registration fees / options included?	Is evidence of participation / activity provided? (for example, name in program)	Has the faculty mentor or department chair submitted an email or letter of support?	Is a completed copy of the Travel Request Form attached and signed by the faculty mentor or department chair?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please refer to the rubric for interpretation of the review criteria.

<i>Review Criteria</i>	<i>Score</i>					<i>Assigned Weight</i>	<i>Weighted Score</i>
	<i>Excellent 5</i>	<i>Good 4</i>	<i>Average 3</i>	<i>Needs Improvement 2</i>	<i>Poor 1</i>		
Abstract							
Description of Anticipated Presentation / Participation Related Activities							
Explanation of why this Conference / Meeting was Chosen							
Budget Reasonableness, Explanation, and Justification							
TOTAL WEIGHTED SCORE (out of XX possible)							

Please return all completed evaluation forms to Dean of Arts & Sciences Office (DHC 225), 717-477-1151.