**APPLICATION FOR STUDENT DISCOUNTED HOTEL ROOM**

1. **CONTACT INFORMATION**

Name of Room Occupant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many nights do you need a room?\_\_\_\_\_\_\_

Arrival date: \_\_\_\_\_\_\_\_\_\_

Departure date: \_\_\_\_\_\_\_\_\_

Do you have a person you would like to share a room with? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If not, we will assign you to a room with one other person.**

1. **CRITERIA FOR FUNDING**
	1. **Are you a member of the planning committee: YES NO**
	2. **Are you presenting? YES NO**
	3. **What are your anticipated travel costs? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
	4. **Do you have additional funding (e.g. from your university)? YES NO**
	5. **Is there anything else you want to tell us about financial need?**

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Please send this form to Nabiha Chaudhary at chaudni@ucmail.uc.edu