

Financial Circumstances

The Trust Agreement for the Frances L. Phillips Travel Scholarship specifies that awards are to be made to students who do not have other financial resources to afford such travel abroad. An applicant should describe his or her financial circumstances, indicating why his or her own resources and those of the family are not sufficient to meet travel costs. Also, the applicant must file the Free Application for Federal Student Aid (FAFSA) for the current year. Please be aware that there is a several week processing time for the FAFSA and that your application cannot be considered without the results of that data. The applicant and/or the family may be asked to provide additional documentation (such as copies of tax returns) to verify financial information. If other financial assistance has been or will be applied for to support the proposed trip, please identify nature and date of notification for such award.

Describe why your and your family's financial circumstances justify consideration for a travel grant.

Have you submitted the FAFSA for the current year to the federal processing agency?
___ Yes ___ No Give approximate date form was or will be filed. _____

Special Qualifications

Describe your academic achievements, including honors, awards and recognition.

Describe your leadership roles and your participation in student activities at UNC-CH.

The Trust Agreement for the Frances L. Phillips Travel Scholarship calls for consideration of the degree to which an applicant possesses "good manners." Describe why you believe good manners are required for travel and why you believe you qualify on this basis.

The Trust Agreement also requires consideration of an applicant's "sense of humor." Describe why you believe you have this characteristic.

Travel Experiences and Plans

Have you previously traveled outside the U.S.? ___ Yes ___ No If yes, give countries visited, dates of travel and purpose of travel.

What countries do you propose to visit if you receive the Frances L. Phillips Travel Scholarship?

Beginning date of Proposed Travel _____ Ending Date _____
(Please note that your travel is expected to be for at least two months and no more than six months)

Statement of Travel

Please attach a statement, on no more than four double spaced, typed pages, about the travel for which you seek scholarship support. Explain the goals you hope to achieve and how the travel will enhance your academic and personal development. Describe your proposed itinerary and travel schedules, your transportation plans, whether you will be traveling alone, and the contacts you hope to make in your travel. **(This statement is an important part of your application and will be a significant factor in the selection of finalists for the Frances L. Phillips Travel Scholarships)**

Estimate of Costs

Please provide carefully researched and reasonable estimates of costs for your proposed travel. You should consult travel guides, travel agencies, the world wide web and other sources to assure that your costs are realistic.

Round trip air fare (Departure from _____ to initial arrival point _____) \$ _____

Ground transportation (Describe _____) _____

Medical Insurance (for entire period of travel) Name of Insurance Carrier/Agency _____

Housing _____ days at \$ _____ average per day _____

Food _____ days at \$ _____ average per day _____

Admission fees to museums, galleries, plays, etc. _____

Preparatory costs (e.g. passport, inoculations, backpack, etc.)
Please itemize _____

Other (itemize) _____

Total proposed budget for trip \$ _____

Amount you and your family will provide toward your costs \$ _____

Total requested from the Frances L. Phillips Travel Scholarship
(not to exceed \$7000) \$ _____

APPLICANT'S STATEMENT OF UNDERSTANDING

I understand that neither The University of North Carolina at Chapel Hill nor any of its agents will be responsible for loss of property, injury or life while I am traveling under the financial support of this scholarship. I also understand that I must carry medical insurance, including specific coverage for evacuation to obtain appropriate medical care if I will travel in countries without adequate medical facilities.

I understand that if I cancel or terminate any planned travel, I am responsible for payment of all fees for which I am obligated without reimbursement from the Frances L. Phillips Travel Scholarship, unless agreed to by the Selection Committee. I understand that I will be expected to complete my travel plans in substantially the same way as proposed or to make a full or partial refund of funds granted at the discretion of the Selection Committee.

I understand that any funds which may be awarded to me under this Scholarship may be subject to taxation. I further understand that it is my responsibility to determine the extent of tax liability and, if required, to report the scholarship on the appropriate tax forms and pay any resulting taxes.

I agree to provide a final written report within two months after the completion of my travel, describing my trip, reflecting on the accomplishment of the goals stated in my proposal, and assessing the effect of my travel on my academic and personal development. I understand that parts of this report may be maintained for access by members of the University community, including students who may be applying for the Frances L. Phillips Travel Scholarships in the future. I understand and agree that excerpts from my report, with proper attribution where appropriate, may be published by the University for the purpose of promotion of the Frances L. Phillips Travel Scholarship program.

In recognition of the Honor Code of The University of North Carolina at Chapel Hill, I certify that the information I have provided in this application and in the attachments is true and accurate to the best of my knowledge.

Signature

Date

RELEASE AND INDEMNITY AGREEMENT

As part of the consideration for participating in the Frances L. Phillips Travel Scholarship Program, I hereby release, hold harmless, and forever discharge The University of North Carolina at Chapel Hill, its employees and agents, from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, property damage, or personal injury, including death, that may be sustained by me or to any property belonging to me, except that caused by the negligence of the University, its employees or agents, while participating in such activity. I am fully aware of the risks and hazards associated with foreign travel and residence, and I acknowledge that said participation in this activity is elected by me and is not required. I voluntarily assume full responsibility for any risk of loss, damage, or personal injury, including death, that may be sustained by me as a result of such activity, except that caused by the negligence of the University, its employees or agents. I further agree to indemnify and hold harmless the University, its employees and agents, from any loss, liability, damage or cost, including court costs and attorney's fees that they may incur due to my participation in said activity, except that caused by the negligence of the University, its employees or agents.

This release and hold harmless agreement is binding on myself, my heirs, assigns, and personal representatives. I acknowledge that I am 18 years old or more.

Signature

Date