



Application for Committee on Knowledge Extension Research (CKER) Actuarial Research Conference (ARC) Travel Grants

Return completed materials no later than **March 30, 2007**

The CKER Committee is offering \$500 (U.S.) travel grants to graduate students from the U.S., Canada, Mexico, or other areas outside of North America, who will be presenting at the 42nd Actuarial Research Conference. The ARC will be held at [Robert Morris University](#) in Moon Township, PA, (seventeen miles from downtown Pittsburgh), from August 9-11, 2007. CKER will take two student applications per school and will guarantee that one qualified student per school will receive a \$500 grant. If there are any funds left after the initial funding, CKER will consider the second student application. The grant amount is based on air travel. If the applicant drives to the 42nd ARC, a lesser amount will be awarded. Each student will need an ARC presentation verification from an advisor, department chair or graduate program advisor (please see item #11.) Grant recipients will be notified by **June 1, 2007**.

(print or type)

1. Date _____ 2. e-mail _____
phone/fax _____

3. Name _____ 4. SS#/SIN# or equivalent _____
(optional)

5. Address _____

6. University _____ Dept. _____ Date started _____

7. Status: Full time _____ Part time _____ If not a full-time student, describe other activities _____

8. Presentation topic at ARC _____

9. Membership in actuarial organizations *(list organization name & membership designation)*

10. Information regarding actuarial examinations:
Organization/actuarial examinations passed _____
Plans for taking actuarial examinations during 2006–07 academic year _____

Please return application by March 30, 2007, to:
Sheree Baker
Society of Actuaries
475 N. Martingale Road, Ste. 600
Schaumburg, IL 60173
E-mail sbaker@soa.org
Phone: 847-706-3565; Fax: 847-706-3599



SOCIETY OF ACTUARIES

11. The following form must be completed by an advisor, department chair or graduate program director verifying the student's status at the university.

**To Advisor, Department Chair, or Graduate Program Director-if you have more than one applicant from your school, please rank them first or second. (See below.)*

Name _____ e-mail _____

phone/fax _____

University _____

Address _____

Student Name _____

Student Concentration _____

Signature _____

I verify that the above is a graduate student who will be presenting at the 42nd ARC in Moon Township in August 2007.

Ranking _____

(if applicable)

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