

5-College STEM Family Travel Initiative Dependent Care Travel Assistance Program

APPLICATION FOR INCREMENTAL DEPENDENT-CARE EXPENSES Overnight Trips (\$1200 Max)

Through a grant from the Elsevier Foundation New Scholars Program, UMass Amherst supports the incremental expense of dependent care during professional travel of its faculty and post-docs with substantial dependent-care responsibility.

Travel support is restricted to faculty and post docs in the ***Science, Technology, Engineering, and Mathematics***, or STEM disciplines. Faculty and post-doctoral fellows in the Five Colleges are currently eligible for up to three overnight travel grants, the total of which cannot exceed \$1200, and one short-term/local (day trip) grant per year. Watch our program in the future to see if this restriction becomes relaxed.

Grants will be awarded on a competitive basis. Priority will be given to those facing the greatest obstacles to travel and participation in events, and for whom the impact of participation will likely be the greatest. We anticipate this group to include post-docs and junior women faculty, single parents, and dual academic career couples with overlapping travel demands.

Information about the program, including eligible departments, and the definition of *incremental childcare expenses* is available at the STEM FTI website (StemFamilyTravel.org).

Eligibility:

- Applicant must be a tenure-track or tenured faculty or post-doc within the Five Colleges.
- Applicant must be the primary care provider (50% or greater responsibility) for at least 1 child, elder, or special needs person, or part of a dual-academic career family.
- Applicant must be working in a STEM (science, technology, engineering, mathematics) field within a qualified department at one of the Five Colleges.

For more information, please contact the STEM Family Travel Initiative at 413-577-1410 or STEMfti@mail.pse.umass.edu.

STEM Family Travel Initiative
Application for Dependent Care Support (Overnight)

Application deadlines are April 1, September 1 and December 1.

**PLEASE SAVE THIS DOCUMENT TO YOUR COMPUTER AND SEND THE
COMPLETED APPLICATION TO: STEMfti@mail.pse.umass.edu.**

I. Your Information

Name:

Email:

Preferred phone number:

College/University: UMass Smith Amherst Hampshire Mt. Holyoke

Department /Program:

Year of Ph.D.:

Year of Hire at 5-Colleges:

Rank:

Years at current rank:

Department Chair:

Email of Department Chair:

If post-doc: Advisor:

Email of advisor:

Have you had STEM FTI funding before? Yes No

If yes, briefly describe its impact on your career (additional invites, collaborations, funding, awards, etc):

If you have undertaken specific child care advocacy activities during STEM-FTI-supported travel, describe them briefly on a separate sheet of paper.

II. Event Information (if applying for more than one trip, you must fill out a separate application for each trip)

Name of event and sponsoring organization:

Date of event:

Location:

Type of function (e.g., conference, panel):

Size of event (Estimated number of attendees):

Describe the nature of your participation (check all that apply)

Invited speaker

Paper presentation

Poster presentation

Panel participation/ discussant

Networking opportunity

Other (please provide details):

How does your participation in this event benefit your career (be specific)?

List any specific advocacy activities you plan to undertake:

Who will receive your advocacy letter?

Name:

You are required to send this advocacy letter.

Address:

Please send a signed copy of your letter to the SFTI office for our records.

IV. Conditions on Funding

I certify to the following:

- **I am responsible for at least 50% of the primary care of the dependent to be covered by this funding.**
- **That the expenses to reimbursed constitute only the incremental costs of childcare associated with this event**
- If I am awarded SFTI funding, I agree to 1) participate in networking activities surrounding my travel, 2) advocate to my conference organizers for improved childcare using materials provided by SFTI, and 3) give SFTI a full accounting of my dependent care experience and expenses within 30 days of the travel.
- In understand that I will be required to provide receipts for all expenses to be reimbursed, and that the award money is taxable income.

Signature:

Date:

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