



THE DEPARTMENT OF ARKANSAS
HERITAGE

National History Day Travel Grant Program

Student Information Sheet

Name

Mailing Address

Parent or Guardian

School District and School (include address)

Teacher and Grade

National History Day Entry Title

Division and Category

I request reimbursement for these travel expenses:

- Airfare** (anticipated cost)
- Mileage by personal auto** (anticipated cost)
- Other expenses while at the contest:** Please list and a cost estimate.

- Write a 50-word description of your project
- What archives, museums or libraries did you use for your research?
- Did you visit any museums, state parks, or other historical locations to gain information about your topic?
- Did you conduct an oral history interview or other interview for your research? Please explain with whom and how the interview benefitted your research.
- List your two most useful primary sources and two of your most useful secondary sources.