

GRADUATE STUDENT TRAVEL GRANT APPLICATION (GS-TRAVEL)

Maximum: \$750.00

Deadline October 15, February 15 and June 15 **Submit 1 Copy and supporting documents via <u>EMAIL</u> to a.norris@uwinnipeg.ca Note: Incomplete applications will not be considered for funding**

			Date: Phone: Email: _	
		Applic	ant's Signature:	
APPLICA)N		
Surname:			Given Name:	
Program:	BioScience	ACS Ind	igenous Studies	Cultural Studies
	JMP- History	🗌 JMP- PA 📋 JM	IP- Religious Stud	ies 🗌 Theology 🗌 MDP
	☐ JMP- Peace an	d Conflict Studies	BRDE Cri	minal Justice MMFT
PRESEN	TATION INFORM	ATION		
Title of paper / poster / presentation:				
		Total Amoun	t Requested: \$	
UNIVERSIT	Y DECISION		(For office use only	/)
Approved Denied AMOUNT GRANTED:		:		
	<u> </u>			
Dean of Gra	aduate Studies:			Date:

		YES	NO
1.	Did you submit an abstract / précis in response to a "Call for Papers"?		
2.	Was your submission peer-reviewed?		
3.	At this time, has your submission been accepted?		
4.	In addition to presenting your paper what, if any, other roles will you be fulfilling at the conference. Check all that apply. Provide supporting documentation for each.		
	Conference Chair		
	Discussant Workshop Leader / Facilitator		
	Keynote Speaker Representative of Society / Association		
	Other (Specify)		

CONFERENCE INFORMATION

1.	Name and Location of Me	eting
2.	Dates of Meeting	From to
3.	Is the meeting	🗌 Regional 🗌 National 📄 International
4.	Is the meeting	Annual Biennial Triennial Other
NB:	Travel arrangement must comply with the	e University's Travel Policy.

BUDGET SUMMARY

1. Airfare / Transportation	\$
	\$
2. Accommodations	\$
	\$
3. Conference Registration Fees	
4. Subsistence (\$45/day in Canada	\$
\$70.00/day Internationally)	
	\$
5. Other Expenses (specify)	
	\$
TOTAL COSTS	
	\$
Total available from other sources	
	\$
TOTAL GRANT REQUESTED	

1. List other funding sources to which you have applied or may be applying for support of this travel (e.g. The University of Winnipeg Students Association):

2. Is the conference / mee	ting able to pr	ovide funds in supp	oort of your travel?	🗌 Yes 🗌 No
If yes, indicate approximat	e amount \$			
The funds are to support	Travel	Subsistence	Registration	General

DEPARTMENTAL EVALUATION – PLEASE TYPE

The Office of Graduate Studies values the Graduate Program Advisor's input on project proposals. Applicants should allow adequate time for their Advisor's reviews to be completed. **This review** <u>MUST</u> **be completed.** Applicants may <u>NOT</u> review their own application. Advisors should ensure that they have addressed the two assessment points below.

NOTE: This evaluation is required from the Student's Department.

a) Graduate Program Advisor's Review

Please comment on the following:

- 1. The scholarly significance of this presentation
- 2. The significance of the conference to the applicant's field of research

Signature of Graduate Program Advisor: ----

PRINT NAME: _____

b) Departmental Graduate Program Committee Chair's Review

Please comment on the benefits expected to accrue to the scholar and the University from the conference

 mmittee Chair:	Signature of Departmental Graduate Program Cor
 PRINT NAME:	
 Signature:	Applicant's acknowledgment of above comments

c)

REQUIRED ATTACHMENTS

Note: Incomplete applications will not be considered for funding

CONFERENCE DETAILS

Provide conference details through a URL address or 1-2 (max) printed pages
Précis / abstract of your paper / poster
Copy of invitation (if invited)
Copy of acceptance (if submission is accepted)
Please describe the importance of this conference in your area of study, and explain how the format of your participation is appropriate for this venue.

RESEARCH and AWARD HISTORY*

List all grants awarded over the past 5 years.* This would include entrance scholarships from UWinnipeg. For each, include the following information:

- a) the year(s)
- b) the granting agency,
- c) the title of the project,
- d) the amount of the grant,
- e) the amount remaining.

List all publications for the past 5 years*.

- a) Provide <u>complete citations</u> for all documents listed (including co- authors, title, publisher, journal, volume, date of publication, page numbers, etc.).
- b) Indicate with an asterisk (*) which publications are refereed.
- c) Specify your role for co-authored publications.

* Including your CV, which lists your funding and publication history, is acceptable.

If you have no publications or funding please indicate this:

I have no previous funding.

I have no publications.