



## GRADUATE STUDENT TRAVEL GRANT APPLICATION

Deadline: October 15, February 15 and June 15 (You must apply to the deadline date that is *before* the start of your travel)

The completed application and supporting documents should be submitted by the Graduate Program Chair via **EMAIL** to [gradstudies@uwinnipeg.ca](mailto:gradstudies@uwinnipeg.ca)

*Note: Incomplete applications will not be considered for funding*

### APPLICANT INFORMATION

Surname:	Given Name:
Email:	Phone:
Program:	
Date:	Applicant's Signature*:
_____	_____

\*For those without an electronic signature, you may sign the document by typing your name

### PRESENTATION INFORMATION

Title of paper / poster / presentation:
Total Amount Requested: \$ _____ (\$750 max)

<u>UNIVERSITY DECISION</u>	<i>(For office use only)</i>
Approved ___ Denied ___	AMOUNT GRANTED: _____
<u>Conditions:</u>	
Dean of Graduate Studies: _____	Date: _____

## EVENT INFORMATION

(The Travel Grant is for graduate students presenting or disseminating research at the event)	YES	NO
Did you submit an abstract / précis in response to a "Call for Papers"?	<input type="checkbox"/>	<input type="checkbox"/>
Was your submission peer-reviewed?	<input type="checkbox"/>	<input type="checkbox"/>
At this time, has your submission been accepted? <input type="checkbox"/> Accepted <input type="checkbox"/> Pending		
<p>In addition to presenting what, if any, other roles will be fulfilling at the event? <i>Check all that apply.</i> Please provide supporting documentation for each.</p> <p> <input type="checkbox"/> Conference Chair      <input type="checkbox"/> Session Chair      <input type="checkbox"/> Discussant  <input type="checkbox"/> Workshop Leader / Facilitator      <input type="checkbox"/> Representative of Society / Association  <input type="checkbox"/> Keynote Speaker      <input type="checkbox"/> Other _____  <input type="checkbox"/> Not Applicable         </p>		
Name of Event:		
Location of Event:		
Dates of Event:      From _____      To _____		
Is the event: <input type="checkbox"/> Regional <input type="checkbox"/> National <input type="checkbox"/> International		
Is the event: <input type="checkbox"/> Annual <input type="checkbox"/> Biennial <input type="checkbox"/> Triennial <input type="checkbox"/> Other		

# REQUIRED ATTACHMENTS

Note: Incomplete applications will not be considered for funding

## EVENT DETAILS

In the area below have provided the URL (web address) with conference information:

In the area below I have described the importance of this conference in my area of study, and explained how the format of my participation is appropriate for this venue:

Below I have provided the précis/abstract of my paper/poster/presentation:

I have attached a PDF copy my invitation and/or acceptance to the event to your GS Travel Grant submission email.

## PUBLICATION AND AWARD HISTORY

### PUBLICATIONS

(List papers published in refereed journals, books, and proceedings for the past 5 years beginning with the most recent.)

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

I have no publications     I have listed my publication history below

**AWARDS & SCHOLARSHIPS**

(List all awards held over the past 5 years. This would include entrance scholarships from the University of Winnipeg)

For each, please include the following information:

- the year(s)
- the granting agency
- the title of the project,
- the amount of the award,
- the amount remaining

I have no previous funding     I have listed my funding history below

**BUDGET SUMMARY** (an estimate of expenses)

Airfare / Transportation	\$
Accommodations	\$
Conference Registration Fees	\$
Subsistence \$45/day Domestic / \$70/day International	\$
Other Expenses ( <i>specify below</i> )	\$
Total Costs	\$
List other funding sources to which you have applied or may be applying for supporting this travel (e.g. <i>The University of Winnipeg Students' Association</i> )	
	-\$
	-\$
	-\$
	-\$
	-\$
Total available from other sources	-\$
<b>TOTAL GRANT REQUESTED</b>	<b>\$</b>

NB: Travel arrangement must comply with the University's Travel Policy.

**EVENT FUNDING**

Is the conference / meeting able to provide funds in support of your travel?  YES  NO

If YES, please indicate the approximate amount: \$ \_\_\_\_\_

The funds are to support:  Travel  Subsistence  Registration  General

Please indicate below any other factors you feel are relevant to your GS Travel Grant application:

**Once completed, please forward this form to your Graduate Program Advisor / Supervisor**

## GRADUATE PROGRAM ADVISOR REVIEW

The Graduate Student Scholarship and Awards Committee values the Graduate Program Advisor's input on project proposals. **This review MUST be completed.** Applicants may **NOT** review their own application. Advisors should ensure that they have addressed the two assessment points below.

*If the Graduate Program Advisor is also the Graduate Program Chair, the Graduate Program Chair review should be completed by the Department Chair.*

Please comment on the following:

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

Signature of Graduate Program Advisor\*: \_\_\_\_\_

\*For those without an electronic signature, you may sign the document by typing your name.

PRINT NAME: \_\_\_\_\_

## GRADUATE PROGRAM CHAIR REVIEW

*If the Graduate Program Advisor is also the Graduate Program Chair, the Graduate Program Chair review should be completed by the Department Chair.*

Please comment on the expected benefits for the scholar and the University from the event

Signature of Departmental Graduate Program Committee Chair\*: \_\_\_\_\_  
\*For those without an electronic signature, you may sign the document by typing your name.

PRINT NAME: \_\_\_\_\_