Graduate Student Travel Grant: Workshop

APPLICATION

The application deadline is October 4

Please note: This grant is for graduate students enrolled in graduate programs in the IK Barber Faculty of Arts & Social Sciences

IDENTIFICATION				
APPLICANT SURNAME:		APPLICANT GIVEN NAME:		
STUDENT ID#:		DEPARTMENT:	DEPARTMENT:	
PROGRAM:		FACULTY SUPERVISOR:		
YEAR OF STUDY (INDICATE PROGRAM YEAR):				
PROGRAM:		YEAR OF STUDY:		
CONTACT INFORMATION				
TELEPHONE:	E-MAIL ADDRESS:			
MAILING ADDRESS:				
WORKSHOP INFORMATION				
NAME OF THE WORKSHOP:				
Name of the Sponsoring Organization/Association:				
LOCATION OF THE WORKSHOP:		DATE (S) OF THE WORKSHO	P:	
WILL YOU BE A REGISTERED UBCO STUDENT AT T	HE TIME OF THE WO	RKSHOP?	YES	No

SUMMARY INFORMATION		
In the space below, please answer the following question: Why is the selected workshop important for the development of the research program?		
	Max: 1000 Characters	

Internal Graduate Student Travel Grant: Workshop Application Revised: November 2022

Travel Details				
Please provide itinerary details including transportation, accommodations and workshop registration.				
		Max: 1000 Characters		
PLIDCET/Discos (allegos)	1	Wax. 1000 Characters		
BUDGET(Please fully complete table below	')			
Total Budget				
	ESTIMATED COSTS	Source of Other Funds		
1. TRAVEL				
2. ACCOMMODATIONS				
3. MEALS/SUBSISTENCE				
4. CONFERENCE REGISTRATION FEES				
5. OTHER (SPECIFY)				
6. TOTAL				
AMOUNT REQUESTED	l			

SIGNATURE SECTION:					
To Be Completed By Faculty Supervisor:					
LETTER OF SUPPORT ATTACHED:					
YES	No				
PLEASE READ AND SIGN:					
I certify that I have read this travel grant application, including the budget, that this applicant is my student and is a graduate student at UBCO in good standing and that all information in this application is accurate to the best of my knowledge, the budget is realistic.					
NAME:	SIGNATURE:	DATE:			
TO BE COMPLETED BY APPLICANT:					
PLEASE READ AND SIGN: I verify that all the information contained within this application is true and complete, to the best of my knowledge. I also confirm that funding to attend this workshop is not readily available from other research grants.					
I certify that I have read and agree to the current rules and directions for the Travel Grant program. I further grant permission to the Travel Grant Committee and the Graduate School to verify my status as a graduate student in good standing at UBC Okanagan and my eligibility for the Travel Grant Competition.					
APPLICANT					
NAME:	SIGNATURE:	DATE:			

Once application is completed and signed, please submit email to Colin McKay colin.mckay@ubc.ca