

FORM 003 – CONFERENCE GRANT APPLICATION

STUDENT INFORMATION

Name: _____ Student Number: _____

Department: _____ Program: _____

Student Email: _____ Phone Number: _____

CONFERENCE INFORMATION

Conference Location: _____ Conference Date(s): _____

Attending

Presenting

SOURCES OF FUNDING

Have you applied for a UMGSA Conference Grant before? _____ If yes, when? _____

Have you applied for an FGS Travel Award? _____ If no, why not? _____

If yes, when? _____

How much do you expect to receive? _____

Have you applied to your home faculty for funding? _____ If no, why not? _____

If yes, when? _____

How much do you expect to receive? _____

Have you applied to your department for funding? _____ If no, why not? _____

If yes, when? _____

How much do you expect to receive? _____

Is there funding available from your supervisor? _____ If so, how much? _____

DEPARTMENTAL DECLARATION (to be signed by University of Manitoba faculty or staff)

I certify that the faculty, departmental and supervisor funding information listed above by the applicant is accurate.

Departmental Representative Signature/Position

Date

EXPENSES AND FUNDING SOURCES SUMMARY

All expenses in this summary must be claimed in Canadian dollars. If you incurred expenses in a foreign currency, please convert the relevant expenses to Canadian dollars (using www.bankofcanada.ca/rates/exchange/) and include a printout of the conversion rate used in the supporting documents of this application.

EXPENSES	
Conference Registration Fee	
Conference Per Diem (meals, local transportation): # of conference days ____ x \$65	
Travel Per Diem (meals, local transportation): # of travel days (max.2) ____ x \$65	
Inter-City Transportation Costs (To/From Conference Location)	
Accommodation	
Printing Costs	
Travel Insurance (if not covered by UMSU Health & Dental Plan)	
Travel Visa Costs	
TOTAL EXPENSES	
FUNDING SOURCES	
Faculty of Graduate Studies Travel Award	
Home Faculty Funding	
Departmental Funding	
Supervisor Funding	
Other Funding (if any)	
TOTAL FUNDING SOURCES	
TOTAL DEFICIT (Total Expenses – Total Funding Sources)	

Did you share accommodation or other expenses? If yes, explain and specify with whom they were shared.

Please leave any other comments below.

APPLICATION CHECKLIST

Please attach documents in the following order for your application.

- | | |
|--|--|
| <input type="checkbox"/> 1. Completed and Signed Conference Grant Application Form | <input type="checkbox"/> 6. Proof of Inter-City Travel (eg. boarding passes) |
| <input type="checkbox"/> 2. Proof of Conference Registration and Payment | <input type="checkbox"/> 7. Proof of Payment: Inter-City Travel |
| <input type="checkbox"/> 3. Copy of Conference Badge | <input type="checkbox"/> 8. Proof of Payment: Accommodation |
| <input type="checkbox"/> 4. Proof of Presentation (if presenting) | <input type="checkbox"/> 9. Proof of Payment: Printing Costs |
| <input type="checkbox"/> 5. Currency Conversion (www.bankofcanada.ca/rates/exchange/) | <input type="checkbox"/> 10. Proof of Payment: Travel Visa/Travel Insurance |

APPLICANT DECLARATION

I certify that I have carefully read the application and Conference Grant guidelines stipulated in the UMGSA Financial Policy Manual (Policy II). I recognize that the submission and qualification of this application is subject to the Conference Grant Policy. I declare that the information contained within this application is correct and accurate; that all of the necessary supporting documents have been included; and that I have organized the contents of the application according to the checklist above. I authorize the UMGSA to investigate the information provided in this application to assess the qualification for this grant if necessary.

Signature of Applicant

Date

UMGSA Approval (VP Internal)

Date