## Université d'Ottawa | University of Ottawa

## APPLICATION FOR A CONFERENCE TRAVEL GRANT

MASTER'S WITH THESIS STUDENT

STUDENT IDENTIFICATION				
SURNAME GIVEN NAMES		STUDENT NUMBER		
ACADEMIC UNIT / DISCIPLINE	1	TELEPHONE NUMBER		
THESIS TOPIC				
EMAIL		FIRST TERM OF REGISTRATION IN PROGRAM YEAR		
		JANUARY APRIL SEPTEMBER		
WRITTEN	CONFIRMATION THAT YOUR PUBLICATION IS ACCEPTED AT THE CO	NFERENCE		
PLEASE SUBMIT THE FOLLOWING DOCUMENTS WITH YOUR APPLICATION CONTRIE	UTIONS AND RECOMMENDATIONS OF THE ACADEMIC UNIT AND / OF	R THE SUPERVISOR WITH SIGNATURES		
ABSTRAC	CT OF YOUR PRESENTATION WITH OFFICIAL AUTHORS LIST			
NAME OF CONFERENCE				
CITY	PROVINCE/STATE	COUNTRY		
LOCATION OF CONFERENCE				
FROM TO	CONFERENCE WEBSITE (IF AF	PPLICABLE)		
DATE OF CONFERENCE				
YEAR MONTH DAY YEAR HOW IS THE TOPIC OF THE CONFERENCE RELATED TO YOUR THESIS?	MONTH DAY			
TOWNS THE TOTAL OF THE COME ENERGY TO TOOK THEOLOG				
EXPLAIN THE RELEVANCE OF THE CONFERENCE FOR YOUR RESEARCH				
EXECUTIVE NEED IN THE CONTENENT ON TOUR NEED INCOME.				
-				
TITLE OF YOUR PRESENTATION		٨		
		POSTER VERBAL PRESENTATION		
NAME OF THE FIRST AUTHOR OF THE PUBLICATION	CO-AUTHOR(S)			
HAVE YOU REQUESTED FINANCIAL ASSISTANCE FROM ANOTHER ORGANIZATION FOR THIS SAME CONFE	ERENCE? YES NO			
THE CONTRACTOR OF THE WASHINGTON TO THE CONTRACT OF THE CONTRA	NO NO			
IF YES, PLEASE	SPECIFY APTPUO CUPE GSAE	D HOME FACULTY OTHER:		
	·			
I CONFIRM THAT I READ THE RULES OF THE PROGRAM AND THAT THE				
INFORMATION PROVIDED IN THIS APPLICATION IS COMPLETE AND ACCURATE.				
	DATE	SIGNATURE (GRANT REQUESTER)		

MASTER'S WITH RESEARCH PROJECT STUDENT

PHD STUDENT

**School of Epidemiology and Public Health** 

seph@uottawa.ca | 613-562-5410 600 Peter Morand Cres., Room 101, Ottawa ON K1G 5Z3



ESTIMATED TRAVEL EXPENSES			
PLEASE LIST YOUR PROJECTED EXPENSES FOR THIS TRIP (AIR, TRAIN, TAXI, ACCOM	ODATION, REGISTRATION FEES, POSTER PRINTING, MEALS, I	ETC):	
Transportation (Air Fare, Train, etc.) - \$	Notes		
Accommodations - \$			
Registration/Conference Fees - \$			
Meals - \$			
Taxi, Ride Sharing, Public Transportation - \$			
Additional Costs - \$			
	THESIS SUPERVISOR'S RECOMME	ENDATION	
IS THE STUDENT'S THESIS TOPIC INDICATED ON PAGE 1 EXACT? YES	NO		
IS THE PUBLICATION TOPIC DIRECTLY RELATED TO THE THESIS?	NO		
PLEASE EXPLAIN THE RELEVANCE OF PARTICIPATING INTO THIS CONFERENCE AT T	HIS STACE OF THE CANDIDATE'S DESEADON DDOCDAM		
TERROL EAL PAINTILE NELEVANCE OF FAINTION ATING WING THIS GOTH ENERGE AT T	III OTAGE OF THE GANGIDATE ONEGENOTH NOONAIII		
WILL THE THESIS SUPERVISOR CONTRIBUTE TOWARDS THIS TRAVEL? YES	NO UNCERTAIN		
WILL THE THEORY OUT ENVIOUN CONTINUOUS TOWARDS THIS TRAVELS.	NO UNCERTAIN		
IF THE SUPERVISOR WILL CONTRIBUTE: REMAINING BALANCE OF	R PLEASE ADD AMOUNT \$	GRANT FDM	
NAME (PRINT)			
	I CONFIRM THAT THE INFO	RMATION PROVIDED IN THIS APPLICATION IS COMP	PLETE AND ACCURATE.
EMAIL L			
	DATE	SIGNATURE (THESIS SUPI	ERVISOR)
	FOR ADMINISTRATIVE USE (	ONLY	
APPROVED REJECTED			
APPROVAL OF THE ADMINISTRATOR	(ADIAT)	DATE	CICNATURE
NAME	(PRINT)	DATE	SIGNATURE

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