Office of the Dean and Vice-Provost Awards

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## GRADUATE STUDENT TRAVEL AND RESEARCH DISSEMINATION FUND APPLICATION

Last Name:	First Name:
UBC Student Number:	
UBC Academic Dept:	Faculty:
lease check all that apply:	
Graduate Registration I was registered as a full-time UBC graduate student at the time	of the conference.
Research Discipline (check one) Natural Sciences or Engineering Social Sciences or	Humanities ☐ Health
Fraduate Student Travel and Research Dissemi I have completed all relevant sections of the application (page 2 I have signed and dated the application on page 2. My faculty supervisor has signed and dated the application on page 2.	of this form).
rtistic work, or have an open access publishing fee charge.	ter, or e-mail listing my name and the title of my poster/presentation. esentation. e, I have provided a rationale for support below.
Rationale for support—If you are requesting support for speak to the nature of your travel activities in relation to your grades.	r travel for an activity other than a paper or poster presentation, please duate program and professional development:
<b>Cillam Doctoral Scholar</b> (check one) - Students holding a octoral Scholarship Travel Allowance before applying to the Graduorm can be found at: <a href="http://www.grad.ubc.ca/forms/killam-fellowship">http://www.grad.ubc.ca/forms/killam-fellowship</a> I am a Killam Doctoral Scholar, but I have already used my entired I am not a Killam Doctoral Scholar	

## **GRADUATE STUDENT TRAVEL AND RESEARCH DISSEMINATION FUND APPLICATION**

## **PRESENTATION DETAILS**

Conference Title:			
Conference Location (City and Country):			
Start Date of Confere	ence:		
End Date of Conference:			
Title of Paper/Poster	Presented:		
OR, OPEN ACCESS PRO	OCESSING CHARG	E DETAILS	
Journal/Publication Name:			
Date Paper Accepted	l for Publication:		
Publication URL, if available			
f the \$500 award offer he information reques		aculty supervisor, rather than to the	applicant, please fill out
Worktag* #:		Please select type of expense reimbursed:	
Must be format GR#####,	non-Worktag speedch	art codes are not valid	
Student Signature:			
Date:			
Faculty Supervisor (	ast name, first name):		
Faculty Supervisor S			
Date:	-9-10-00-0-		
_ = = = = = = = = = = = = = = = = = = =			