



CIP - Application for Travel Support

Date of request: _____

Name: _____ McGill ID: _____

Email address: _____ Year in CIP: _____

Supervisor: _____

Proposed Travel Dates: _____

Purpose of your travel:

Conference Name & Location:

Present research ☐

Attend a Course ☐

Site Visit ☐

Title of Presentation:

Name of First Author: _____

Summary of expenses		Approximate Budget: \$500 CAD	
Travel & Food	Hotel	Registration fees	Number of days
For Office Use Only			
Approved YES NO		More information required: <input type="checkbox"/>	
		Specify: _____	
Approved by: _____		Date: _____	