

## GRADUATE RESEARCH ENHANCEMENT AND TRAVEL (G.R.E.A.T.) AWARDS **APPLICATION FORM**

APPLICATION DEADLINE								
July 31 – for conference presentations held September 1 to December 31, inclusive.								
	November 30 – for conference presentations held January 1 to April 30, inclusive.							
	March 31 – for conference presentations held May 1 to August 31, inclusive.							
<b>Note:</b> Should the deadline fall on a weekend or holiday, the deadline will be the following working day. <b>Late applications will not be accepted.</b>								
PART A – TO BE COMPLETED BY APPLICANT PERSONAL INFORMATION								
Name:			McGill ID:					
Deg	ree/Year:	Supervisor:						
Email:								
CONFERENCE INFORMATION								
Name of Conference:								
Title of paper or poster being presented:								
Paper/presentation is a multi-authored work:				Yes		No		
If YES, are you the principal author?				Yes		No		
Will you be presenting the paper?				Yes		No		
Location of Conference (City, Country):			Dates of Conference:					
CHECKLIST INFORMATION  Application form Part A.								
	Application form Part B – including supervisor's signature.							
	Applicant's signature below.							
	Proof that paper has been accepted for conference presentation. (It is not necessary to submit proof of acceptance at the time of application. Proof is required for award payment.)							
Submit your application and supporting documents to the ECE Graduate Programs Office, McConnell Room 602.								
Applicant's signature:				Date:				

## PART B - TO BE COMPLETED BY SUPERVISOR

Name of Conference:							
Title of paper or poster being presented:							
Brief statement regarding the value of participation to the applicant with regard to his/her research (optional):							
I confirm that the above-mentioned student we the conference.	vill be pursuing full-time stu	dies at the time of his/her presentation at					
I certify that the above information is true to t	the best of my knowledge.						
I fully endorse the application of the above na	med applicant for a G.R.E.A	a.T. Award.					
Name of Supervisor (please print):	Email address:						
Supervisor's signature:		Date:					
PART C: TO BE COMPLETE BY THE GRADUATE PROGRAMS DIRECTOR OR DELEGATE							
Application accepted. Amount awarded \$750.00 or other amount \$							
Application declined.							
Graduate Programs Director/Delegate (please print):							
Graduate Programs Director/Delegate signature:	Date:						

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