

## THE GREAT and WARES TRAVEL AWARD APPLICATION FORM

- Part 1: August 1<sup>st</sup> Application Deadline** for conferences/scholarly meetings between **September 1<sup>st</sup>** with a conference end date no later than **December 31<sup>st</sup>**. [EXPENSE REPORT DEADLINE JANUARY 7<sup>TH</sup>](#).
- Part 2: December 1<sup>st</sup> Application Deadline** for conferences/scholarly meetings between **January 1<sup>st</sup>** with a conference end date no later than **April 30<sup>th</sup>**. [EXPENSE REPORT DEADLINE MAY 7<sup>th</sup>](#).
- Part 3: April 1<sup>st</sup> Application Deadline** for conferences/scholarly meetings between **May 1<sup>st</sup>** with a conference end date no later than **August 31<sup>st</sup>**. [EXPENSE REPORT DEADLINE SEPTEMBER 7<sup>TH</sup>](#).

\*\*\*\* International travel outside Canada & US – applicants may only apply once every 2 years\*\*\*\*  
 \*\*\*\*\* PI's can only nominate one member of his/her lab per competition\*\*\*\*\*

### PART A: To be completed by Applicant

Name (Last / First ):	
Current Academic Status (Ph.D3, M.Sc.2, etc.):	Student ID #:
Student McGill email address:	

### CONFERENCE INFORMATION

Name of Conference / Scholarly Meeting:	
Title of paper, presentation, or poster being presented ( <i>*attach copy of abstract &amp; if available copy of acceptance letter for abstract</i> ):	
Paper / presentation is a multi-authored work:	<input type="checkbox"/> YES <input type="checkbox"/> NO
If YES, are you the principal author?:	<input type="checkbox"/> YES <input type="checkbox"/> NO
Will you be presenting the paper?:	<input type="checkbox"/> YES <input type="checkbox"/> NO
as poster	<input type="checkbox"/> or oral presentation <input type="checkbox"/>
Location of Conference / Scholarly Meeting(City, Country):	
Dates of Conference / Scholarly Meeting	

### PART B: To be completed by Supervisor

Brief Statement regarding the value of participation to the applicant with regard to his / her research:
<input type="checkbox"/> I confirm that the above-mentioned student will be pursuing full-time studies at the time of his / her presentation at the conference / scholarly meeting. <input type="checkbox"/> I certify that the above information is true to the best of my knowledge. <input type="checkbox"/> I fully endorse the application of the above named applicant.
<b>Name of Supervisor (Please Print):</b>
<b>Supervisor Signature &amp; Date:</b>