Science Education Conference Awards 2023 Application Form

McGill ID	Last Name, First Name			Position (Student, Lecturer, Staff Member, Faculty) *Students, please indicate expected date of graduation.			
Department/Program/Unit			Email Address				
CONFERENCE DETAILS							
Title of Conference & Website							
Start and End dates in this format: DD/MM/YYYY			Location				
		BUDGET DETA	ILS (CAD)				
Transportation expenses	Accommodation expenses	Registration Fees	Meals (r	not included in conference)	Cost of Materials		
Total Requested Amount (CAD)			Please indicate any additional sources and amounts of funding for this conference, approved or applied for (if there are no other sources, please write "NONE").				
		ADDITIONAL IN	FORMATI	ON			
maximum):							
Please include your ideas for sharing your experience within the McGill community. If you wish to discuss these ideas with the Office of Science Education (OSE) staff prior to the submission of your application, please contact our office (150 words maximum):							
If y	ou are submitting a propo	osal, please provide t	he title ar	nd abstract here (could b	e a draft):		

CONTACT INFORMATION

Marcy Slapcoff, Director
Office of Science Education
Faculty of Science
ose@mcgill.ca

EXPECTATIONS OF AWARDEES

By signing this form, you agree to these conditions:

- You are a McGill student, staff member or instructor at the time of the conference.
- You will participate fully in the conference by attending sessions and/or presenting.
 - If presenting, you will provide your final abstract for the OSE website.
- Upon return from the conference, you will share ideas and experience with the McGill community (this could be a presentation to your home department and/or at an OSE event).
 - You will participate in an evaluation of the SECA program (a follow-up survey and/or interview).

SIGNATURES							
By signing below, the applicant certifies all information given in this document is true and correct to the best of their knowledge, and agrees to the Expectations of Awardees as listed above.							
Applicant's name (please print)	Date	Office of Science Education (please print)	Date				
Signature		Signature					
TO BE COMPLETED BY THE OFFICE OF SCIENCE EDUCATION							
Approved conference award amo	ount:	CAD					