



Graduate Mobility Award Application Form

APPLICANT INFORMATION							
Student ID	Family name		Given nam	е			
Department/Program		Date of latest advisory/supervisory committee meeting prior to travel					
Year of study (e.g. PhD2)	Citizenship	McGill email address					
GRADUATE MOBILITY DETAILS							
Indicate the start and end date of the activity* (DD/MM/YYYY) *Do NOT include time used for quarantine or personal purposes Start End date date		Country/Region					
Type of mobility:		Host institution					
Provide more information if other:		Host supervisor					
	Budget	Details					
Please provide a budget estima	te for the mobility activity bullet points or number:	s or letters are a	acceptable:	Requested amount (CAD)			
				Have you received Mobility funds in the past in your current degree? Yes No			
Please indicate any additional s	ources and amounts of funding for this travel appr	oved or annlied	for (if there	If yes, please indicate when (e.g. Jan 2021): are no other sources please write "NONF").			
Please indicate any additional sources and amounts of funding for this travel, approved or applied for (if there are no other sources please write "NONE").							

PROJECT DETAILS					
STATEMENT OF PURPOSE					
Briefly describe the proposed mobility activity and how it will complement your program of study at McGill.					
	CHECKLIST OF ATTACHMENTS				
	\Box Certificate of completion of your Pre-departure orientation (if not available at the time of submission, one must be submitted before payment can be released).				
	\square CV of the applicant				
	\square I confirm that my McGill Supervisor has submitted their letter of support to GPS.				
	\square I confirm that I have completed my Travel Registry.				
	\Box I confirm that I have developed a plan to manage my safety, relying on a study and understanding of the conditions of the pandemic and prevailing health directives at the destination in any location(s) visited as part of travel.				
TERMS AND CONDITIONS					
	Changes in plans, including dates of activity, must be reported immediately to the Academic Unit and to GPS. Failure to do				
	so may result in the withdrawal of the award.				
	Traveling during a pandemic poses additional risks and challenges that must be taken into account when contemplating and planning travel. The McGill guidelines for travel must therefore be followed.				
	Upon return from travel, GMA recipients are required to provide Proof of Travel (i.e. boarding passes) by filling out the				
_	Survey and Proof of Travel form. Failure to provide proof of travel within 30 days of the return date may result in the				
	withdrawal of the award. Kindly note that airplane tickets are NOT accepted as proof of travel. A boarding pass is required.				
	If the trip does not involve air travel, contact us at <u>graduatefunding.gps@mcgill.ca</u> to inquire what proof of travel is acceptable for your trip.				

TO BE COMPLETED BY THE ACADEMIC UNIT AND/OR FACULTY

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 Terms and Conditions as listed above.
- By signing below, the supervisor, Graduate Program Director and Faculty Associate Dean* confirm they have reviewed this application, including the budget, and are nominating this student for the Graduate Mobility Award.

GPS will review the submission, assign an award amount, and sign below for final approval.

Applicant's name (please print)	Date	McGill Supervisor name (please print)	Date			
Signature		Signature				
Signature		Signature				
Graduate Program Director Name (please print)	Date	Faculty Associate Dean* name (please print)	Date			
Signature		Signature				
For Faculty use only						
Faculty Associate Dean's comments on information GPS should take into consideration before approving the award amount.						
Graduate and Postdoctoral Studies Approval (For internal use only)						
Approved award amount (CAD):						
Comments:		Graduate Funding Manager	 Date			
		Signature				
FURTHER INSTRUCTIONS						

- > *Please note that applicants from Dental Medicine & Oral Health Sciences, IPN, QLS, BBME, Law, Management and Music are not required to provide a signature from a Faculty Associate Dean.
- Once all signatures (excluding GPS') have been obtained, please submit your application and supporting documents to GPS through the $\underline{\mathsf{GM}}\mathsf{A}$ web form.