

# SCHULICH CONFERENCE TRAVEL FUND

## **OVERVIEW:**

- The Schulich Travel Fund is not intended to be an award based on merit. These funds are generally available to faculty who are unable to cover costs related to conference travel.
- Funds are granted to eligible faculty for the fiscal year starting May to April of the following year
- Unused funds **CANNOT** be carried over to the next year

## **ELIGIBILITY CRITERIA:**

1. Active participation/organization in a seminar, symposium or conference as presenter, panelist, discussant or session chair.
2. **ALL internal** research funds from Schulich have been exhausted.

Note: The holding of external funds (e.g., NSERC, SSHRC, PER) does not prohibit one from being awarded faculty conference travel funds.

All eligible requests, based on these criteria, will be met, subject to availability of funds.

## **VALUE**

Maximum value: \$1500 per year

# SCHULICH CONFERENCE TRAVEL FUND REQUEST FORM

PLEASE READ THE APPLICABLE POLICY AND PROCEDURES RELATING  
TO THE GRANT BEFORE COMPLETING THIS REQUEST FORM

**\* REQUEST FORM WILL BE ACCEPTED BEFORE DEPARTURE AND WITHIN 3 MONTHS OF RETURN FROM TRAVEL**

|                         |   |                           |
|-------------------------|---|---------------------------|
| <b>APPLICANT'S NAME</b> | PRINT SURNAME   | PRINT FIRST NAME          |
|                         | AREA GROUP  | SIGNATURE<br><br><b>X</b> |
|                         | DESTINATION CITY  | DESTINATION COUNTRY       |
|                         | TITLE OF CONFERENCE, SEMINAR, SYMPOSIUM, FESTIVAL OR PROFESSIONAL MEETING (including dates of travel) |                           |
|                         | TITLE OF PRESENTATION OR PROFESSIONAL FUNCTION/ROLE   |                           |
|                         | TOTAL \$ REQUESTED  |                           |
|                         | \$  |                           |

**SUBMIT REQUEST FORM TO RESEARCH OFFICER, FARHANA ISLAM  
G319 (McEwen Building) FOR REVIEW**

**PLEASE NOTE: Claims for reimbursement of expenses must be submitted within 6 months of return from travel.**

|  |                    |
|--|--------------------|
| RESEARCH OFFICER'S COMMENTS/REVIEW                   |                    |
| RESEARCH OFFICER'S SIGNATURE                         | DAY / MONTH / YEAR |
| <b>X</b>   |                    |
| ASSOCIATE DEAN RESEARCH APPROVAL                     |                    |
| Yes <input type="radio"/> No <input type="radio"/>   |                    |
| AMOUNT OF \$ APPROVED BY THE ASSOCIATE DEAN RESEARCH |                    |
| \$   |                    |
| ASSOCIATE DEAN RESEARCH SIGNATURE                    | DAY / MONTH / YEAR |
| <b>X</b>   |                    |