



# Conference Sponsorship Program and Student Travel Support to Competitions

## STUDENT Application Form

### Funding Request for: A) Student Conference or B) Student Group Travel to Competitions

(Applications will not be accepted for Conferences/Competitions that take place prior to the application deadline)

_____ Surname	_____ First/Given Name
_____ Faculty	_____ Department
_____ Room #	_____ Building
_____ Phone	_____ Email
_____ Signature	_____ Date

**Checklist: (as per "Call for Applications" Guidelines)**

1) **Signatures** from Applicant, Department Head, Dean/Director, **and** Supervisor

2) **A Budget** [1 page max] outlining income amounts, sources and anticipated expenses

3) **Financial Support** from Department Head and Dean/Director (with a combined total equal to Amount Requested \$)

**A**  Conference being hosted by Student (Group) of the University of Manitoba at:

Fort Garry Campus     Bannatyne Campus

Off Campus/Other: \_\_\_\_\_

Title of Conference

\_\_\_\_\_ to \_\_\_\_\_  
Conference Dates

**B**  Student Group Travel to Competitions outside of Manitoba  
(NOTE: Undergraduate Student Level Only)

Competition Title and Location

\_\_\_\_\_ to \_\_\_\_\_

Travel Dates (NOTE: Student travel costs to attend or present at Conferences are NOT funded under this Program)

This section to be completed by all applicants

Amount Requested

Exposure	Number
International	
National	
Provincial	
U of M	

Provide confirmed/expected attendance at each level of exposure

Note a post conference update will be required to confirm attendance as well as expenditures.

#### MUST BE COMPLETED as per "Call for Applications" Guidelines

Department Head: \_\_\_\_\_  
Print Name

Signature: \_\_\_\_\_

Financial Support \$ \_\_\_\_\_

Date: \_\_\_\_\_

#### MUST BE COMPLETED as per "Call for Applications" Guidelines

Dean/Director: \_\_\_\_\_  
Print Name

Signature: \_\_\_\_\_

Financial Support \$ \_\_\_\_\_

Date: \_\_\_\_\_

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**MUST BE COMPLETED as per "Call for Applications" Guidelines**

Supervisor:  
Print Name \_\_\_\_\_

Additional Support \$  
Optional \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**Forward completed application to:**

Carol Hill  
Office of the Vice-President (Research and International)  
202 Administration Building  
Phone: 204-474-6915  
Email: [Carol.Hill@umanitoba.ca](mailto:Carol.Hill@umanitoba.ca)

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April 2018