

***APPLICATION FOR A POSTGRADUATE RESEARCH***

***CONFERENCE PRESENTATION GRANT***

*THIS IS AN AWARD MADE BY THE UNIVERSITY RESEARCH SUPPORT SERVICE, PROCESSED BY THE* ***GRADUATE STUDIES OFFICE****, BASED ON THE INFORMATION PROVIDED BELOW.*

*PLEASE READ THE TERMS AND CONDITIONS BEFORE APPLYING*

 (*FOR OFFICE USE ONLY* ) NUMBER ­\_\_\_\_\_\_\_ \_

FINANCE REFERENCE CODE ­ D03010/20901 STUDENT NUMBER ­\_\_\_\_\_\_\_\_\_\_\_

PLEASE COMPLETE ALL SECTIONS

1. NAME …………………………………………………………………………………….
2. SCHOOL / UNIT ………………………………………………………………………….
3. NAME OF SUPERVISOR …………………………………………………………………
4. CURRENT YEAR OF REGISTRATION (eg. 2024-25):
5. NUMBER OF YEARS COMPLETED:
6. HOW MANY TIMES HAVE YOU AVAILED OF THE TRAVEL GRANT BEFORE?
7. ARE YOU SELF-FUNDED? YES/NO
8. IF YOU ARE NOT SELF-FUNDED WHAT IS YOUR SOURCE OF FUNDING (E.G. FACULTY SCHOLARSHIP, SFI SCHOLARSHIP ETC.)?
9. IF NOT SELF-FUNDED, DOES YOUR FUNDING ALLOW FOR CONFERENCE PARTICIPATION?
	1. YES/NO
	2. IF YES: PLEASE CONFIRM THAT YOU HAVE UTILISED ANY CONFERENCE FUNDING THAT HAS BEEN PROVIDED BY YOUR FUNDER
10. PLEASE PROVIDE DETAILS OF THE CONFERENCE/LAB VISIT/SUMMER SCHOOL YOU ARE PRESENTING AT:
	1. NAME + URL:
	2. DATE OF CONFERENCE:
	3. LOCATION OF CONFERENCE:
	4. PAPER OR POSTER PRESENTATION:
	5. TITLE OF YOUR PRESENTATION:
	6. DATE OF YOUR PRESENTATION:
11. WHAT AMOUNT ARE YOU APPLYING FOR? (Please read the terms and conditions in advance)

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We verify that the details provided above are accurate and that we are aware of and will abide by the terms and conditions of this funding:

APPLICANTS SIGNATURE …………………………………. DATE \_\_\_\_\_\_\_\_\_\_\_

SUPERVISOR’S ENDORSEMENT ………………………….. DATE \_\_\_\_\_\_\_\_\_\_\_

GSO SIGNATURE ……………………………………………. DATE \_\_\_\_\_\_\_\_\_\_\_