

CANMES GRADUATE STUDENT TRAVEL GRANTS

APPLICATION FORM

Name: _____

Postal address: _____

Tel/Fax: _____

E-mail: _____

Your University & Department: _____

Program (MA or Ph.D.) & year: _____

Name, Dates & Location of Conference: _____

Title of Your Paper: _____

Amount of available institutional or grant support (\$): _____

Amount requested: _____ of which _____ fees, _____ travel, _____ lodging

For CANMES use only:

Decision: _____

Grant amount: _____ Date: _____

Please send the application form and all required information to:

Professor James A. Reilly

University College

University of Toronto

Toronto ON M5S 3H7

Fax: (416) 971-2027 [Attn: Prof. J. Reilly]

E-mail: <james.reilly@utoronto.ca>