

**FACULTY OF Nursing**

4-171 Edmonton Clinic Health Academy

**Travel Award Application**

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**Applications** can be submitted up to 3 months prior to the travel date. Requests after the travel will not be considered. Students are expected to apply elsewhere for funds as well as the Faculty of Nursing (see 5 below). Approved applications will be processed for payment by the earliest available monthly payroll deadline as determined by the Payroll Operations office.

**Eligibility Requirements:** You must be a registered graduate student in the Faculty of Nursing both at the time of application and at the time of the proposed travel.

**Application Information:**

* Applications are reviewed on a first-come, first serve basis. Students may apply for conference attendance, conference participation, or travel to a research centre to partake in an educational event or course. The amount allocated will depend upon the destination and the estimate of eligible expenses.

**Please include along with this application from:**

1. Copy of abstract
2. Proof of acceptance of abstract (or indicate pending)
3. Budget and receipt of conference registration
4. A paragraph on how the conference attendance contributes to your program.
5. Other funding applied for:
6. Graduate Students’ Association Professional Development Grant http://www.gsa.ualberta.ca/index.php/funding/content/category/professional\_development\_grants/
7. FGSR <http://www.gradstudies.ualberta.ca/awardsfunding/scholarships/travel/>;
8. Supervisor

Student Name:       UofA ID Number:

Student Email Address:

Supervisor:

Purpose of Travel (check one): [ ]  Paper [ ]  Poster [ ]  Panel Discussion [ ]  Exhibition of Work

Dates of Travel: Departure:  mm/dd/yy  Return:  mm/dd/yy

Name and Location of conference:

|  |
| --- |
| Estimate of Travel Costs (include ALL expenses in Canadian dollars) |
|  | Amount ($CAD) | Description/Particulars |
| Conference Registration |       |       |
| Meals |       |       |
| Airfare |       |       |
| Ground Transportation |       |       |
| Accommodation |       |       |
| Other |       |       |
| *Total Estimated Expenses* |       |  |

Indicate the value and source of any other funding you will receive (i.e. from supervisor; FGSR; GSA).

*(enter amount here, or N/A if you will not receive any other funding)*

I have read and understand the eligibility requirements for travel awards and declare that the information given on this application is true and complete, and I understand it is subject to verification.

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Signature of Student Date

Personal information on this form is collected under the authority of Section 33(c) of Alberta’s ***Freedom of Information and Protection of Privacy Act*** for authorized purposes including admission and registration; administration of records, scholarships and awards, student services; and university planning and research. Students’ personal information may be disclosed to academic and administrative units according to university policy, federal and provincial reporting requirements, data sharing agreements with student governance associations, and to contracted or public health care providers as required. For details on the use and disclosure of this information call the Faculty of Graduate Studies and Research at 492-3499 or see www.ualberta.ca/FOIPP.

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Department Chair/Supervisor (please print)

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Signature Date