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| University of Victoria | *For Awards Committee use* |
| Faculty of Education | GPA \_\_\_\_\_\_\_\_\_\_\_\_ # of Units \_\_\_\_\_\_\_\_\_ |
| *Application for Scholarships* | Criteria met \_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| *Grants & Awards* |  |

**ORCA BOOK PUBLISHERS STUDENT MOBILITY AWARD IN TEACHER EDUCATION**

One or more awards are given to undergraduate students in the Faculty of Education Teacher Education program to enhance the student learning experience through, but not limited to, field schools, conferences and practicum placements. The award will also assist students with the costs of travel and fees associated with their activity. Preference will be given to students in spring practicum placements. Application forms are available on the Faculty of Education's website and must be submitted by December 1.  Applicants must submit a letter (max 350 words) outlining how they will use this award to enhance their learning experience and a budget (template provided). Approval of the recipients will be made by the Senate Committee on Awards upon the recommendation of the Faculty of Education.

**To be eligible for this award the activity/travel must occur between**

**•September 1, 2024-August 31, 2025 for students who are returning in Fall 2025**

**•September 1, 2024-April 30, 2025 for students who are graduating in Spring 2025**

Check the following boxes that are applicable:

❒ I am enrolled in a Teacher Education program.

❒ I have enclosed a letter of application outlining how I will use this award to enhance my learning experience.

❒ I have enclosed a budget (template attached to this application form).

❒ I will be graduating in Spring 2025.

**Incomplete applications will not be considered!**

**Personal Information**

Surname

Usual first name Second name or initial

Student #: No. of units taken fall & winter term:

 Last institution attended:

Present Address:

Permanent Address:

**Additional Information**

List the names of at least two regular or sessional faculty members, and their institution, who would be able to support your application, if required by the Committee.

 Name Institution

 Name Institution

Signature of Applicant Date

**\*Deadline for applications: December 1 to the Office of the Associate Dean Undergraduate Programs. Please email your application package as one PDF document to** **adasst@uvic.ca****.**

**BUDGET FORM**

|  |  |
| --- | --- |
| **Name:** |  |
| **Student Number:** |  **V#**  |

**Reason for travel (practicum--list course # & CRN, conference, workshop, volunteer, other)**

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| --- |
| **Reason for travel:**  |
|  |
| **Location (City/Province/State/Country):** |
| **Travel dates:** |

**Estimated expenses**:

|  |  |  |
| --- | --- | --- |
| **Expense** | **Amount** | **Notes** |
| **Transportation** |  |  |
| **Accommodation** |  |  |
| **Meals** |  |  |
| **Registration Fee** |  |  |
| **Other** |  |  |
|  |  |  |
|  |  |  |

**Sources of Funding:** Have you already received funding towards your upcoming travel? If so, please indicate funding sources and amount received.

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| --- | --- | --- |
| **Funding Source** | **Amount Expected** | **Amount Received** |
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