

## **Travel Grant Regulations**

The Faculty of Graduate Studies (FGS) and the Graduate Students' Society (GSS) have established a Graduate Student Travel Grant Fund. The objective of the fund is to support travel to conferences, meetings, workshops, or research activities. This grant is not available for assistance with course required travel or non-research-based travel. Students are reimbursed for expenses only upon return from travel. The FGS administers this fund, which is distributed on a first-come, first-served basis to eligible graduate students. Priority will be given to first time recipients as long as their applications are received at least two months prior to the month of travel and they meet all the other eligibility requirements at the time notices are sent. Please see <a href="Iravel Grant FAQ">Iravel Grant FAQ</a> for details on notice timing.

#### **Eligibility Criteria - check list:**

| You are registered full time in the term in which you plan to travel                      |
|-------------------------------------------------------------------------------------------|
| You do not owe outstanding fees to the university                                         |
| You have not yet received a travel grant for the current fiscal year (April 1 - March 31) |
| Your supervisor or advisor has signed the travel grant application                        |
| You have included a copy of your letter of acceptance (if presenting a paper/poster)      |

#### To Apply:

Fully complete the application and submit it to the Office of the Dean, Faculty of Graduate Studies, Room A207, University Centre or email to <a href="mailto:fgsschol@uvic.ca">fgsschol@uvic.ca</a>, <a href="mailto:no more than four months prior to the date of travel">no more than four months prior to the date of travel</a>. Applications submitted after travel will not be considered. Only complete applications will be considered.

#### **Award Amounts:**

- 1. A maximum of \$600 to **present a paper/poster** at a conference outside BC, Alberta, or Washington State.
- 2. A maximum of \$400 to **present a paper/poster** at a conference outside of Vancouver, Vancouver Island, or Seattle, but within BC, Alberta, or Washington State.
- 3. A maximum of \$300 to be used to **attend** conferences/workshops, or to conduct research outside of Vancouver, Vancouver Island, or Seattle.
- 4. A maximum of \$150 to **present or attend** conferences/workshops or do research in Vancouver, Seattle, or on Vancouver Island.

### **Claiming Travel Expenses:**

Upon return from travel, you must submit an original completed and signed travel expense claim form with proof of travel (*original* boarding passes and receipts). The receipts must total the amount for which you have been approved. *Please note that you will not be reimbursed for expenses which have been paid for by other individuals, and departments and faculty members will not be reimbursed by this program.* Travel expense claim forms and instructions can be found on the University of Victoria Accounting Services website: <a href="http://www.uvic.ca/vpfo/accounting/assets/docs/acctpayable/TER.pdf">http://www.uvic.ca/vpfo/accounting/assets/docs/acctpayable/TER.pdf</a>

Instructions for completing claims can be accessed by clicking 'How to complete this form' in the top right corner of the claim. Please note that there is a 30 day deadline for submitting claims which will be strictly enforced.

<u>Questions/Cancellations</u>: Please call the Faculty of Graduate Studies, Scholarship

Assistant at 721-8451 or email <a href="mailto:fgsschol@uvic.ca">fgsschol@uvic.ca</a> Also contact us to cancel if you are unable to use the travel grant. We will re-establish your eligibility to receive a Travel Grant.



# **Travel Grant Application**

| This section to I                                                                                                                                                                                                                                                          | oe completed by                   | the APPLIC          | CANT   |                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------|--------|-----------------|--|
| Student Name:                                                                                                                                                                                                                                                              | Student #:                        |                     |        |                 |  |
| Dept/School:                                                                                                                                                                                                                                                               | Email:                            |                     |        |                 |  |
| Address:                                                                                                                                                                                                                                                                   | Phone:                            |                     |        |                 |  |
| Have you ever received a Faculty of Graduate                                                                                                                                                                                                                               | e Program Sta                     | Program Start Date: |        |                 |  |
| Studies travel grant before?: Yes ☐ No ☐                                                                                                                                                                                                                                   |                                   |                     |        |                 |  |
| Conference/Meeting/Research Information: Name of conference/meeting/research: Location(City/Province/State/Country): Conference/meeting/research travel dates: Will you present a paper or poster?* Title of paper or poster: * If yes, proof of acceptance must be attack |                                   | order for the a     | Yes* □ | No  e processed |  |
| Estimated Evaposes                                                                                                                                                                                                                                                         | Transportation.                   | ¢                   |        |                 |  |
| <u> </u>                                                                                                                                                                                                                                                                   | Transportation:<br>Accommodation: | \$<br>\$            |        |                 |  |
|                                                                                                                                                                                                                                                                            | Meals:                            | \$<br>\$            |        |                 |  |
|                                                                                                                                                                                                                                                                            | Registration Fee:                 | Φ<br>¢              |        |                 |  |
|                                                                                                                                                                                                                                                                            |                                   | ·                   |        |                 |  |
| Signature of Applicant                                                                                                                                                                                                                                                     |                                   | Date                |        |                 |  |
|                                                                                                                                                                                                                                                                            |                                   |                     |        |                 |  |
| This section to be completed by a Please note: students will not be reimbursed for                                                                                                                                                                                         |                                   |                     |        |                 |  |
| refunds will be paid to students only.                                                                                                                                                                                                                                     |                                   |                     |        |                 |  |
| Supporting comments:                                                                                                                                                                                                                                                       |                                   |                     |        |                 |  |
| Is this a group presentation YES / NO? Is this Supporting Comments:                                                                                                                                                                                                        | · ·                               | _                   | -      |                 |  |
| Is the applicant receiving any financial sup                                                                                                                                                                                                                               | port?                             |                     |        |                 |  |
| From the Department or School?                                                                                                                                                                                                                                             | \$                                |                     |        |                 |  |
| From research grants or other sources?                                                                                                                                                                                                                                     | \$                                |                     |        |                 |  |
| Name of Supervisor/Graduate Advisor (Please print)                                                                                                                                                                                                                         | Signature                         |                     |        |                 |  |