Please complete this checklist to ensure your TRAVEL GRANT APPLICATION PACKAGE is complete. Forward it along with one hard copy or electronic copy of your completed application form.

Attach the signed SFU Research Funding Application Signature Sheet (“Sig Sheet” available from: http://www.sfu.ca/ors/forms/SFUsigsheet.html

Application Form, to include:

- The applicant’s signature
- Program identifying you as a presenter OR official announcement of conference
- The confirmation from the Conference Organizer that your paper has been accepted
- A copy of your abstract
- The Chair’s Evaluation

“Special Case” applicants only: Attach a copy of the email from the Committee’s Chair advising you of your eligibility to apply.

NOTE: Hard copy or electronic Travel Grant Application packages are accepted from eligible* applicants provided the “POOL” is open.

Electronic Application packages should be emailed to ors@sfu.ca.

(*NOTE: See eligibility information in the Guidelines on our website at http://www.sfu.ca/ors/fundingopportunities/grant-eligibility.html.)
Please indicate: 

☐ NORTH AMERICAN\(^1\)  ☐ INTERNATIONAL\(^2\)

☐ Priority 1 Application\(^3\)  ☐ Priority 2 Application\(^4\)

☐ Pool 1 (conference begins April 1 to August 31)  ☐ Pool 2 (conference begins September 1 to March 31)

Name of conference: _______________________________________________________

Location: ___________________________ Dates: ___________________________

Number of days of participation at conference: ________________________________

Sponsoring Organization: ___________________________________________________

If the conference is one of a series, indicate frequency and location of last conference:

________________________________________________________________________

Title of paper: ___________________________

Main research area to which this paper is related: _______________________________

If a paper is not being presented, what will be your contribution?

☐ Keynote Speaker  ☐ Other:

Amount Requested: (towards airfare only. Please refer to the attached application guidelines).

NORTH AMERICAN GRANT: $_____ Economy Airfare to a maximum of $900.00 CAD

INTERNATIONAL GRANT: $_____ Economy Airfare to a maximum of $2,000.00 CAD

\(^1\) North American travel includes travel to Mexico

\(^2\) International travel includes travel to Cuba

\(^3\) Priority 1 application: For faculty members who have not been awarded an SFU/SSHRC Travel Grant (either International or North American) in the past fiscal year.

\(^4\) Priority 2 application: For “Special Case” applicants only. [NOTE: Special case applications will be considered for funding towards the end of each fiscal year. Please note that funds for these applications are limited.]
Attach the following supporting documentation and submit it to your Chair/Director for evaluation.

1. **Program identifying you as presenter or official announcement of conference**

2. **Copy of the confirmation of acceptance from the Conference organizer**

3. **Abstract of your paper** (as sent to the conference committee).

The information on this form is collected under general authority of the University Act (R.S.B.C. 1979, c.419) and according to the Guidelines and Terms of Reference of the SFU/SSHRC Institutional Grants Program. This information is directly related to and needed for the SSHRC North American/International Travel program and will be used to review and make a decision about applications, administer grants and generate grants reports from an electronic database. If you have any questions about the collection and use of this information, contact the Director, Research Services at 604-763-4274.

*I declare that the information contained on this application is accurate and complete to the best of my knowledge and that the funds are required to support my own research or travel. I agree to abide by the conditions specified in the terms of reference of the Program as interpreted by the SFU/SSHRC Institutional Grants Committee.*

Signature: _______________________________ Date: _______________________________
Name of Applicant: ____________________________

Please indicate:  ☐ NORTH AMERICA  ☐ INTERNATIONAL

Please give your assessment of the following (this information is important to assist the Chair in distinguishing between applications when funding requests exceed the amount available).

In the case of applicants who are not tenured or tenured-stream faculty, please evaluate the appropriateness of this applicant in relation to research activities in your department. Please note that the tenure of the award must occur within the time frame of the applicant’s appointment.

**Status of Conference**

Type:  ☐ SERIAL  ☐ INVITATIONAL  ☐ OTHER

How often held? ________________

Specify: _________________________

**Rating with discipline**

Is this conference considered:

☐ Prestigious (an honour to be invited)  ☐ A major conference of broad general interest

☐ A minor conference of good reputation  ☐ A minor conference of limited interest

Comment: ________________________

**Contribution of applicant**

Is a paper or poster being presented?  ☐ YES  ☐ NO

If YES, is the paper being presented at a:

☐ PLENARY SESSION  ☐ SEMINAR SESSION  ☐ WORKSHOP  ☐ POSTER SESSION

Will the paper be published in conference proceedings?  ☐ YES  ☐ NO

Is an abstract of the paper attached to the application?  ☐ YES  ☐ NO

If a paper or poster is not being presented, what is the contribution of the applicant?

☐ KEYNOTE SPEAKER  ☐ OTHER
As a contribution to the state of knowledge within the discipline, how do you rate the potential of this applicant’s contribution in this format?

- [ ] HIGH
- [ ] AVERAGE
- [ ] LOW

**Overall Rating**

Would the department or the applicant be able to cover these costs wholly or partially from other sources (existing research grant, departmental travel funds, etc.)?

In consideration of the importance of this conference/event and the potential contribution of the applicant, how would you rate this application?

- [ ] HIGH
- [ ] AVERAGE
- [ ] LOW

Signature: ____________________________  Department: __________________________

Date: ______________________________