



MS2DISCOVERY INSTITUTE RESEARCH & TRAVEL GRANT APPLICATION

General Information

Name of Applicant: _____

Student ID / Year / Gender _____

Program/Department _____

Supervisor Name / MS2Discovery Tecton # _____

Contact details (E-mail): _____

Purpose of Travel (complete all fields which are applicable)

| | |
|--|--|
| Name of event / Purpose of visit: | |
| Location / Dates | |
| Title of presentation / project | |
| Outcome expected (e.g., a full proceedings paper or a journal publication) | |
| Amount Requested: | |

Budget (all rates must comply with the WLU Research Expense Guidelines)

| Travel and Transportation | | | Costs: |
|---|-----------|------|---------------|
| Dates of Travel | Place | Mode | |
| | | | |
| Accommodations: | | | |
| Cost per day: | # of days | | |
| Meals | | | |
| Allowance per day: | # of days | | |
| Max \$70 | | | |
| Registration / Conference Fee (if applicable): | | | |

| | |
|--|--|
| Other Expenses: (Example: Research equipment, software ,etc): | |
| | |
| | |
| | |
| TOTAL \$ | |

CHECKLIST (please tick all applicable)

- I have read the guidelines / regulations for MS2Discovery grants/awards
- I have submitted my CV and cover letter
- I have submitted a research statement and a budget justification
- I have arranged a letter of reference sent by an MS2Discovery Faculty Member
- I have attached the abstract of my presentation
- I have submitted conference details (e.g., website/program/call for papers)
- I have submitted my acceptance letter from conference organizers

Signatures

1. The information in this application is complete and correct:

Signature of Applicant

2. I am aware of this application for funding:

Name _____

Signature of MS2Discovery Faculty Supervisor
