URB Graduate Student Conference Award

Application Form

Please fill ALL of the fields.

Personal Details

	1		T		
ID:	First name:		Family name:		
Email:	☐ MS/MA/MPH	☐ PhD			
	Other (please specify)				
Faculty:		, , , , , , , , , , , , , , , , , , ,	Department:		
Date of Joining Graduate Program:			Estimated date of graduation:		
	•		, and the second		
Supervisor Name:			Supervisor email:		
			Caparition circum		
Research is funded totally or	partially by:	Research	is funded totally or partially by:		
☐ URB		Other (please specify)			
Grant Title:		Grant Titl	le:		
Is there any other funding source that could be used for funding the conference/meeting? (Explain)					
Have you presented (talk/poster) at any other conference while in your present graduate program? (if yes, please list all conferences names, dates and funding source)					
		T			
Conference Name:		Conferen	ce Location (city/country):		
			, , , , , , , , , , , , , , , , , , , ,		
Conference Start Date:		Conforce	es End Date:		
Conference Start Date:		Conteren	ce End Date:		

Estimated Costs (in USD)

Registration		\$	
Hotel:		\$	-
Travel:			
Flights:			
Other transport:			
	Total Travel	\$	
Miscellaneous			
(such as poster printing, visa expenses,	, etc)		
	Total Subsistence	\$	
Tatal Fadinata I Fanana			_
Total Estimated Expenses		\$	
 proof of registration and ab Intent Letter any other material (includin Date:	g quotes for the above exp		
To be filled by the Advisor: • Please rate the conference of the		O OTHER EXTERNAL or	
Advisor Name:	Advisor Signature:		