

Application for Conference Travel Support

1. APPLICANT INI	FORMATION:				
Name:					
Department:					
	Telephone Number:				
Email:					
Title of paper (please	provide letter of confirmation	or a copy of the program):			
Sponsor and focus of	the Conference (please provide	e documentation about the conference):			
Location, start and er	nd dates of your participation in	the conference (Day/Month/Year):			
How this will benefit	the USMC/RSM Community:				
2. COSTS: Transportation (least From (city)	expensive method):To (city)	<u>\$</u>			
Accommodations:					
Rate per night: \$	+ Number of nights:	\$			
Subsistence Requeste	:d:				
Number of days:	@ \$80 (CND or USD for US	S travel) \$ Total: \$			
	ARDS: Please list 3 most recen	t awards from SSHRC or other			
USMC/RSM sources					
Date:	Name of award:	Amount of award:			
Date:	Name of award:1	Amount of award:			

Date:	Name of award:	Amount of award:
Signature of the Applicant:		Date:
	L OF PRINCIPAL, DEAN, DI s application has my support.	RECTOR OR CHIEF LIBRARIAN:
Name		Signature
Date:		

PLEASE SUBMIT AN ELECTRIC COPY OF COMPLETED FORM PLUS CV IN AN APPROVED FORMAT TO THE USMC RESEARCH ADMINISTRATION COMMITTEE