

Application for hosting a conference or colloquium support

1. APPLICANT INFORMATION:
Name:
Department:
Telephone Number:
Email:
2. CONFERENCE OR COLLOQUIUM INFORMATION:
Title and description of the conference or colloquium, including dates:
Brief description of participants in the conference or colloquium:
Anticipated outcomes of the conference or colloquium:
How the conference or colloquium will benefit the USMC/RSM community:

3. COSTS:			
Travel costs (not honoraria or accommodation) for speakers:			
Total:			
Budget narrativ	e:		
4. PREVIOUS USMC/RSM so		cent awards from SSHRC or other	
Date:	Name of award:	Amount of award:	
		Amount of award:	
		Amount of award:	
Signature of the Applicant:		Date:	
	L OF PRINCIPAL, DEAN, DIR s application has my support.	ECTOR 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