Faculty Research Development Fund- **CONFERENCE TRAVEL** | 1

Do not complete a ROLA for this application. If you are successful, a ROLA will be initiated for you at that time.

Complete this application, sign it electronically, have your Chair sign it electronically, create a pdf, and email it to [socsci-researchofficers@uwo.ca](mailto:socsci-researchofficers@uwo.ca).

If you have any questions, please direct them to [socsci-researchofficers@uwo.ca](mailto:socsci-researchofficers@uwo.ca).

**Part 1**

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Department: |  |
| Name: |  | E-mail: |  |
| Telephone: |  | ORCID |  |
| Rank: | Full Professor  Associate Professor  Assistant Professor  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

**Part 2**

|  |
| --- |
| Title of the application: |
| If you were to submit this to one of the Tri-Councils, which would it go to? |
| Total amount requested (maximum of $2,500): |

**Part 3**

|  |
| --- |
| Did you apply to any internal funding program in the last 12 months? Yes No |
| If yes, were you successful? Yes No |
| Do you currently hold external research funds? Yes No If so, are they related to this application? Yes No |
| Will the current project support students? Yes No If yes, how many and at what level? |
| Does this project require: Human Ethics Animal Use Biohazards  If yes, provide protocol number: \_\_\_\_\_\_\_\_\_ |

**Part 4: Proposal:**

|  |  |
| --- | --- |
| Name & location of the Conference: |  |
| Date of the Conference: |  |
| Is this an International Conference? |  |
| Is this an annual conference in your area? |  |
| Has your paper been accepted? |  |
| Are you presenting multiple papers or playing a role in organizing the conference/a session? |  |

**Part 5: Abstract**

Please include your paper abstract attached as a separate page (under page 5).

|  |  |  |  |
| --- | --- | --- | --- |
| **Part 6: Budget** | | | |
| Please write a 500 word max. (11pt Times New Roman) justification for your application. Please ensure that you justify the budget expenses and indicate the importance of this presentation in terms such as knowledge mobilization from a funded project, involvement of students or trainees preliminary presentation of results in anticipation of publication and so on. See the FDRF information page for links to Western policies and guidelines. | | | |
|  | | | |
| **TRAVEL** | **DESCRIPTION** | **TOTAL** |
| DESTINATION | MODE (Air or Train) |  |
|  |  |  |
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| SUBSISTENCE |  |  |
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| ACCOMODATION |  |  |
|  |  |  |
|  |  |  |
| OTHER |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| TOTAL: | |  |

| **Part 7: CV ( Abbreviated CV Summary)** | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Funding Sources:** | | | | | | | | | |
| Surname and initial(s) of principal investigator and co-investigators | Project title OR Conference name, year, and location: | Project period:  *Research* ***–*** *start and end date*  *Travel* ***–*** *date of conference* | | Funding agency or internal funding program | Type of support requested (i.e. research, strategic, equipment, etc.): | | Funds requested and funds received | | Status (i.e. awarded, denied, pending). |
| **a) Support held in the past 5 years, but now complete:** | | | | | | | | | |
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| **b) Support currently holding:** | | | | | | | | | |
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| **c) Support applied for in the last 5 years (pending and denied):** | | | | | | | | | |
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| --- | --- | --- | --- | --- | --- |
| **Student Supervision and HQP Training:** | | | | | |
|  | **Currently** | | **Over the past five years**  **(excluding the current year)** | |  |
|  | **Supervised** | **Co-supervised** | **Supervised** | **Co-supervised** | **Total Number** |
| Undergraduate |  |  |  |  |  |
| Master’s |  |  |  |  |  |
| Doctoral |  |  |  |  |  |
| Postdoctoral |  |  |  |  |  |
| Others |  |  |  |  |  |
| Total Number |  |  |  |  |  |

**Publications:** On a separate page, please list your 5 most significant publications with a brief description (1 pp max – under page 6). Also, please include a brief, 5-year CV (under page 7).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Part 8: Approvals** | |  | |  |
| Applicant’s Signature: |  | | Date: |  |
| Chair’s Signature: |  | | Date: |  |
| Dean’s Signature: |  | | Date: |  |

**Abstract:**

**Publications:**

**CV:** Please include a brief, 5-year CV.