

TRAVEL GRANT GUIDELINES — KILLAM POSTDOCTORAL FELLOW

- Travel grants are for presentation of a paper or poster at scholarly meetings/conferences and can be applied for by Killam Postdoctoral Fellows. **The letter of acceptance from the conference must be attached to this application.**
- Fellows are eligible to apply for more than one travel grant during the period of their fellowship at Dalhousie; however, the combination of travel grants cannot exceed \$1,000.00.
- **Fellows must be presenting a paper or poster based on his or her research.**
- Department/School approval must be given to applications for conference travel.
- Applications will not be accepted retroactively or for conferences which occur after the conclusion of the two-year fellowship.
- Per diem rates are as follows:

Breakfast	\$ 9.00
Lunch	\$ 14.00
Dinner	\$ 24.00
- After the conference, a completed travel expense claim form together with original receipts, accounting for the travel grant, must be approved by your Department and submitted to Graduate Studies.
- Please note: visa, banquet, printing, and abstract costs are not eligible.
- Applications must be submitted at least one month prior to the conference date via the [FGS Online Submission Platform](#).

APPLICATION FOR TRAVEL GRANT — KILLAM POSTDOCTORAL FELLOW

▪ APPLICATION MUST BE WORD-PROCESSED OR TYPEWRITTEN.

NAME:	
DEPARTMENT:	BANNER ID #:
YEAR OF FELLOWSHIP:	SIN #:
TELEPHONE:	E-MAIL:
MAILING ADDRESS:	

PURPOSE: TO PRESENT PAPER / POSTER (LETTER OF ACCEPTANCE MUST BE ATTACHED)		
CONFERENCE NAME:		
CONFERENCE LOCATION:		
CONFERENCE DATE(S):		
IS THE CONFERENCE TAKING PLACE PRIOR TO THE END OF YOUR FELLOWSHIP?:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IS THE PAPER/POSTER BASED ON YOUR RESEARCH?:	<input type="checkbox"/> YES	<input type="checkbox"/> NO

ALLOWED COSTS:		
ITEM	DETAILS	AMOUNT
AIRFARE		\$
GROUND TRANSPORTATION		\$
REGISTRATION FEE		\$
ACCOMMODATION		\$
PER DIEM		\$
TOTAL		\$

CONTRIBUTION TO THIS TRIP FROM OTHER SOURCES:	
CONTRIBUTOR	AMOUNT
	\$
	\$
	\$

AMOUNT OF TRAVEL GRANT REQUESTED:	\$
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APPLICANT _____ SIGNATURE _____ DATE _____

SUPERVISOR _____ SIGNATURE _____ DATE _____

DEPARTMENT CHAIR/SCHOOL DIRECTOR _____ SIGNATURE _____ DATE _____

SUBMIT TO: FACULTY OF GRADUATE STUDIES
ROOM 314, HENRY HICKS BUILDING
DALHOUSIE UNIVERSITY
6299 SOUTH STREET
PO BOX 15000
HALIFAX, NS, CANADA, B3H 4R2