MICRO TRAVEL GRANT APPLICATION

Please ensure you are eligible for this travel grant and have reviewed the guidelines. Submit this form **2–3 months before** your planned travel date. Incomplete applications will not be reviewed.

	CONFERENCE DETA	AILS
Name	of Conference or Even	t:
		e/Country):
		Country):
		nce:
		nce:
II.	BUDGET	
Please	e enter the estimated c	ost for each category (in CAD). Note: Only eligible expenses are reimbursed
– refei	r to the guidelines. Fui	nding is awarded up to \$500 (within BC) or \$1,000 (outside BC).
Regis	stration fees	
Trans	sportation	
Acco	mmodation	
Meal	ls	
Total	l expenses (CAD)	
III.	APPLICATION STA	FEMENT
	APPLICATION STA	TEMENT nent (80-120 words) to describe how this opportunity supports your
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IV. SIGNATURES

Supervisor/ PI Name:	
Supervisor/ PI Signature:	
Date:	
Student Signature:	
Date:	