



TRAVEL REQUEST FORM

This is a request for a travel advance *(Receipts will be forwarded at a later date)*

This is a request for a travel reimbursement *(Receipts are attached)*

NAME:

TYPE OF AWARD HELD:

START DATE OF AWARD:

ADDRESS WHERE
CHEQUE IS TO BE SENT:

TELEPHONE
AND E-MAIL:

AMOUNT REQUESTED:

REASON FOR REQUEST:
(Name of conference, date,
location, etc.)

PARTICIPATION ROLE:
(Oral presentation, poster,
attendee, etc.)

APPLICANT SIGNATURE:

SUPERVISOR SIGNATURE:

DATE:

Please note that a maximum food allowance of \$60.00 CAD/day is provided – receipts are required. Refer to travel allowance guidelines for details.