

## APPLICATION FOR ALEX CUMMINGS TRAINEE TRAVEL AWARD

The Arnie Charbonneau Cancer Institute is pleased to offer the Alex R. Cummings Trainee Travel Awards on a competitive basis to eligible trainees who are presenting their research at a National or International conference or symposia. The aim of the award is to develop presentation skills among trainees and enhance networking opportunities.

### APPLICATIONS MUST BE SUBMITTED PRIOR TO DEPARTURE

#### APPLICATION DEADLINES:

Applications must be received 4 weeks prior to conference travel and will be adjudicated four times per year (April, July, Sept, Dec).

#### APPLICATION SUBMISSION CHECKLIST:

Completed Travel Award Application Form

Application must be signed/supported by your Supervisor

Confirmation of abstract submission and conference registration

Copy of the abstract

Trainee's updated CV (including biographical information, education, research experience, publications and abstracts, awards and honors)

**Note:** Please attach the completed application form and supporting documents electronically to Carmen Coelho at [charb.education@ucalgary.ca](mailto:charb.education@ucalgary.ca)

If you have any questions, please contact Carmen Coelho at [charb.education@ucalgary.ca](mailto:charb.education@ucalgary.ca) or 403.210.3934, HRIC 2AA-07

**Both Applicant and Supervisor** have carefully read the guidelines for the Alex Cummings Trainee Travel Award, followed the instructions to complete this form, and certify that the information contained in this form is true and complete.

<b>Trainee Signature:</b>	
<b>Supervisor Signature:</b>	
<b>Date of Submission:</b>	

## Applicant Information:

Trainee Program:	MSc	PhD	Post-Doctoral Fellow:
Applicant Name:			
Department:			
Telephone:		Email:	
Start Dated in current program:		Expected Completion Date:	
Do you hold or have applied for other travel funding: If yes please explain:		YES	NO
Indicate funds expected from other source:			

## Supervisor Information:

Supervisor's Name:	
Telephone:	Email:

## Travel Details:

Conference Name/Meeting:		
Conference Location (City and Country):		
Conference Start Date:	Conference End Date:	
Type of Presentation:	Oral	Poster

## Estimated Budget:

BUDGET ITEM	REQUEST FROM CHARB (\$)
Airfare	
Accommodation	
Registration Fee	
Meals *for meals not included with conference	
Other (specify)	
TOTAL	