

CHCI Travel Fund Application Form

Part I. To be completed by Applicant

Applicant First Name: _____ Last Name: _____

Email: _____

Department: _____

Status (please check one below):

- PhD post qualifier
- PhD pre-qualifier
- Master (thesis)
- Master (coursework)

Conference Name: _____

Start date: _____ End date: _____

Location: _____

Type of attendance:

- Presenting
- Attending only
- This will be my first time at a conference

Estimated cost of attendance: _____

Funding from other sources:

Source: _____ Amount: _____

Source: _____ Amount: _____

Source: _____ Amount: _____

Provide the title of your main contribution, as it will appear in the publication. Please use the following format: First Author, Second Author, ...: "Contribution Title." In Editor 1, Editor 2, Conference Proceedings, pages, Location, Year: _____

What type of contribution is your main contribution? (Check all that apply)

- Peer-reviewed
- Archival
- Full paper
- Short paper
- Workshop organization
- Doctoral consortium/Workshop paper
- Student Research competition
- Poster/Contest entry

What is the paper acceptance rate for this conference? _____

If you have other contributions to the meeting, please describe them here:

I have read the travel funding policy as shown on the CHCI website. I certify that all information provided on this form is true and correct to the best of my knowledge.

Date : _____ Applicant's signature: _____

Part II. To be completed by Applicant's Advisor or Committee Member

Advisor/Member First Name: _____ Last Name: _____
Email: _____ Phone: _____

Endorsement:

Contribution from Advisor:

- I will contribute toward the applicant's expenses in the amount of \$ _____
 I cannot contribute toward the applicant's expenses.

Date: _____ Advisor/Member signature: _____