Kinesiology Graduate Student Travel Award Application

APPLICANT INFORMATION	
Applicant Name:	Graduate Program: Kinesiology
Western Email:	Date of Application:
CONFERENCE DETAILS	
Name of Conference:	
Location of Conference: CITY:	PROVINCE/STATE: COUNTRY:
Date(s) of Conference: START DATE:	END DATE:
PRESENTATION DETAILS	
Title of Presentation:	
Type of Presentation:	Paper Officially Accepted:
Additional Notes:	
BUDGET	
Conference Registration:	For Western's Travel & Expense Reimbursement Policy, visit: http://www.uwo.ca/finance/accounting/travel_expense_reimbursement.
Travel:	Note: Meals are ineligible expenses.
Accommodations:	
TOTAL:	
Eligible Award Value:	
applications received.	ry from the maximum eligible award value depending on the number of eligemo from the Kinesiology Graduate Office within six weeks of the application
CLAIMANT:	
	cordance with University policy and will not be used as claims to otle reflect due regard for value for money. Personal expenses have been the din writing.
Name: Signatu	re: Date: