



Graduate Mobility Award Application Form 2018-19

Student ID	Family name			Given name				
			Data effects at	*				
Department/Program			Date of latest advisory/supervisory committee meeting prior to travel					
Year of study (e.g. PhD2)		McGill email address						
		TDAV	EL DETAILS					
Indicate the start and end	date of your sta		Country					
indicate the start and end	uate of your sta	ay abroau (DD/WIWI/TTTT)	Country					
From		То						
Type of mobility:			Host institution					
	teral exchange,	/research partnership						
Fieldwork			Host supervisor					
Research stay at a lal	abroad		Host supervisor					
Other:								
		BUDG	ET DETAILS					
Travel expenses (CAD)	Acco	ommodation expenses (CAD)	Living expenses (CAD)	Requested amount (CAD)			
Please indicate any addition	nal sources and	d amounts of funding for this travel, a	nproved or applied	for (if there are no other	sources, please write "NONE").			
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		STATEMEN	IT OF PURPOSE					
Briefly describe the p	urpose of th	e proposed research/study tra	avel and how it	will complement you	ur McGill program of study.			





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CHECKLIST OF ATTACHMENTS

The letter of support from McGill Supervisor is attached.

The applicant's CV is attached.

A Travel Registry has been completed and accepted.

TERMS AND CONDITIONS

- Changes in travel plans, including dates of travel, must be reported immediately to the Academic Unit and to GPS.
 Failure to do so may result in the withdrawal of the award.
- Upon return from travel, GMA recipients are required to provide Proof of Travel (i.e. boarding passes) by filling out the Survey and Proof of Travel form found at:
 https://www.mcgill.ca/gps/funding/travel/grad-mobility-award/graduate-mobility-award-survey-and-proof-travel-failure to provide proof of travel within 30 days of the return date may result in the withdrawal of the award. Kindly note that airplane tickets are NOT accepted as proof of travel. A boarding pass is required. If the trip does not

involve air travel, contact us at graduatefunding.gps@mcgill.ca to inquire what proof of travel is acceptable for your trip.

A	CAD
Approved award amount:	CAD

SIGNATURES

By signing below, the applicant certifies all information given in this document is true and correct to the best of their knowledge, and agrees to the Terms and Conditions as listed above.

By signing below, the supervisor, Graduate Program Director and Faculty Associate Dean* confirm they have seen this application including the budget and are nominating this student for the Graduate Mobility Award.

Applicant's name (please print)	Date	McGill Supervisor name (please print)	Date
Signature .		Signature	
Graduate Program Director Name (please print)	Date	Faculty Associate Dean* name (please print)	Date
Signature		Signature	

FURTHER INSTRUCTIONS

- *Please note that applicants from Dentistry, IPN, Law, Management and Music are not required to provide a signature from a Faculty Associate Dean.
- Once all signatures have been obtained, please submit your application and supporting documents to GPS through the GMA webform found at: https://www.mcgill.ca/gps/funding/travel/grad-mobility-award/gma-application-form