Research Training Centre

Trainee Travel Award Application

Please email your completed application form, abstract acceptance, receipts (if applicable) to rtc@smh.ca.

PART A: Tr	ainee Infor	mation				
Trainee Name						
Trainee Type	inee Type ☐ Graduate Student			□Postdoctoral Fellow		
E-mail Address	s					
Supervisor						
Supervisor E-n	nail					
Graduate School: (if applicable)						
Name of Conference						
Location of Conference						
Date(s) of Attendance			m/dd/yy): m/dd/yy):			
PART B: Re	eimburseme	ent Infor	mation			
Supervisor Ad						
Format: Company (X) – AU (XX) - Activity						
PART C: Sig	gnatures					
	been reimbursed t				or travel. We agree that none of these understand that this application will not be	
Signature of Trainee:				Date:		
Signature of Supervisor:			Date:			
Please Note:	Maximum ar account.	1. Maximum amount of reimbursement is \$1,000 CAD – this will be transferred to your supervisors account.				
	2. Please submit original receipts to your PI, and copies of receipts to the RTC.					