Office of Graduate & Postdoctoral Studies

John Black Graduate Travel Grant

Last Name:	 First Name:	
Student ID:	 Degree Program:	
Department/School:		

Eligibility:

UNIVERSI ⁹⁷GUELPH

Master's students with at least an "A-"average in the last 2 years, registered in a Political Science program (POLS/ CCJP), the Capacity Development and Extension program, or the collaborative International Development Studies program (any department) in class level 1 to 3 at the time of application and who plan to travel to conduct thesis research, attend a conference, or take a course.

Destination:

Travel Dates: From	То	
Reason for Travel: Presenting at a conference – paper accepted	Conducting research	Attending a conference
Presenting at a conference – decision pending	Taking a course	
Title of Research:		

In the space provided, briefly describe the research or course.

Complete this section only if travel destination is outside Canada.

Funding applications for travel to destinations for which the Department of Foreign Affairs has a Travel Warning will not normally be considered. Check their <u>website</u> for an up-to-date listing.

Check A or B below. If completing B, all 3 boxes must be checked and all signatures obtained.

- A) I have checked the Foreign Affairs website and certify that there are no Travel Warnings for my destination country and/ or region as of this date.
- **B**) There is a Travel Warning for my destination and there are extenuating circumstances which require me to travel there.

I have obtained the approval of my advisor and the Dean of my college to travel to a destination for which Foreign Affairs has issued a Travel Warning.

I have also contacted Lynne Mitchell in the Centre for International Programs and after meeting with her, have signed the appropriate High Risk Waiver, which will remain on file in the Centre for International Programs.

Advisor's Signature:	Date:	
College Dean's Signature:	Date:	
Centre for International Programs:	Date:	

Itemized Budget:

Expense Description	Expense Amount
Total Expenses	

Other sources of funding for this travel:	
Student's Signature:	Date:
	Date
To Be Completed By Primary Advisor:	
Please note that Advisors have a responsibility to make	e a significant financial contribution to student travel especially
when the travel relates directly to or is required for th	
What are the benefits of this travel to the student's	nrogram2
what are the benefits of this traver to the student's	

I am able to fund this travel:	Yes	No		
Amount:				
Reason:				
Advisor's Signature:			Date:	

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