

Arthur D. Latornell Graduate Travel Grant

Last Name: Student ID: Department/School:	First Name: First Name: Degree Program:
Eligibility: Registered graduate students in any interest relates to resource manager	ollege with at least a first-class ('A-') average in the last two years whose research ent and/ or resource conservation are eligible. One travel award is available for a set to resource remediation/ reclamation. Due to your Department/ School by
I confirm that my research relates to Resource Management/ Resource	
Resource Remediation/ Reclamate	n
Destination:	
Travel Dates: Fro	To
Reason for Travel: Presenting at a conference – pap	accepted Conducting research Attending a conference
Presenting at a conference – deci	
Title of Research:	
In the space provided, briefly descri	the research and how it relates to one of the themes listed above.

Latornell Graduate Travel Scholarship Program Nomination Form

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:
College Dean's Signature:	Date: _		
Centre for International Programs:	Date: _		
Itemized Budget:			
Expense Description		Expense Amount	
Total Expenses			

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Other sources of funding for this travel:			
Student's Signature:	Date:		
To Be Completed By Primary Advisor:			
Please note that Advisors have a responsibility to make a signiful when the travel relates directly to or is required for the student			
What are the benefits of this travel to the student's program?	?		
I am able to fund this travel: Yes No			
Amount:			
Reason:			
Advisor's Cignature	Data		
Advisor's Signature:	Date:		
To Be Completed By Department/School:			
Average in the last 2 years:			
Ranked of total applicants from department,	/ school for this competition.		
Confirmation that research is related to:			
Resource Management/ Resource Conservation			
Resource Remediation/ Reclamation			
Graduate Coordinator's Signature:	Date:		

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