|  |  |  |  |
| --- | --- | --- | --- |
| **PDF Name – As it appears on your official UBC employee record** | | **UBC Academic Department** | |
| **UBC Employee ID** | | **Email Address** | **Phone** |
| **Supervisor/PI Name** | **Supervisor’s/PI’s Email** | | |

|  |  |
| --- | --- |
| **Conference Title** | |
| **Conference Location (City, Country)** | |
| **Conference Start Date** | **Conference End Date** |
| **Title of Paper or Poster Presented** | |

To receive your award, please submit the following documents within 3 weeks of the award acceptance:

**BY EMAIL** to [med.gradpostdoc@ubc.ca](mailto:med.gradpostdoc@ubc.ca)

* Your completed PDF Travel Awards Conference Report (Please save as a Word document)
* A completed PDF Travel Awards Reimbursement Form
* Original, itemized and dated receipts

**Description of Expenses**

All travel expenses must comply with UBC Policy #83: Travel and Related Expenses.

A maximum of $750.00 CAD can be awarded.

Please summarize below the total amounts spent in each eligible category for each receipt that you are submitting for reimbursement. It does not matter if the TOTAL AMOUNT does not exactly equal $750.

To claim per diem, you must provide a copy of the full conference program that shows which meals were and were not included with the conference registration fee.

|  |  |  |
| --- | --- | --- |
|  | **Amount Spent** | **Currency** |
| **Conference registration** |  |  |
| **Accommodation** |  |  |
| **Airline, train or bus** |  |  |
| **Car rental** |  |  |
| **Mileage** |  |  |
| **Inner-city transportation (eg: taxi, public transit)** |  |  |
| **Meals or per diem** |  |  |
| **TOTAL AMOUNT** |  |  |

**Applicant Confirmation**

I hereby certify that the travel expenses claimed above to comply with UBC Policy #83: Travel and Related Expenses, and that the expenses outlined here have not and will not be claimed from any other source.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor Confirmation**

I hereby certify that the travel expenses claimed above to comply with UBC Policy #83: Travel and Related Expenses, and that the expenses outlined here have not and will not be claimed from any other source.

Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_