



Application Form

Applicant Information

Name

First Name

Last Name

Position (select one)

MSc Student

PhD Student

Post-doctoral Researcher

Non-tenured Professional

Other (please specify)

Affiliation/Institution

Department

Institution

Country

Start of program/employment

Contact Information

Email address

Mailing address

Academic Advisor or Supervisor (if applicable)

Name

Title

Email address



Conference Information

Conference name

Location (City, Country)

Start Date

End Date

Are you the primary author of a paper at the conference?

Yes

No

Will you present the paper?

Yes

No

Title of your paper:

Are you involved in any other way with the conference?

Yes

No

If so, how?

Grant Request

| | Funds (USD) | Explanation |
|----------------|--------------------|--------------------|
| Travel | \$ | |
| Hotel | \$ | |
| Registration | \$ | |
| Other | \$ | |
| Total Expenses | \$ | |

Available Funds

What funds do you have available? \$

From your department: \$

From your University or College: \$

From a research grant: \$

Other: \$

Total Funds Available: \$

Total Grant Requested from SIGWEB \$



Endorsement from Advisor/Department Chair (if applicable)

Advisor/Department Chair

Date