

Application for
Travelling Award for Research Training
in 2008/9

Closing Dates
22 February 2008 (Round 1)
4 July 2008 (Round 2)

Please refer to the *Travelling Award for Research Training
Funding Policy for Funding Commencing in 2008/9*

**Please submit one (1) original application to the address below and email one (1) electronic copy to
training.awards@nhmrc.gov.au**

Postal Address
Training Awards
Researcher Support Section
NHMRC
GPO Box 1421
CANBERRA ACT 2601

Courier Address
Training Awards
Researcher Support Section
NHMRC
Level 5
20 Allara Street
CANBERRA ACT 2601

LATE OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Travelling Award APPLICATION ID

**Application for
Travelling Award for Research Training
in 2008/9**

Closing Dates 22 February 2008 (Round 1), 04 July 2008 (Round 2)

1 Full Name of Applicant

Title

Gender (M/F)

Surname

Given Names

2 Full Details of Current Department and Institute

	<i>Postcode</i>	

Telephone

Email

3 Current Application I.D. Number

--	--	--	--	--	--	--

4 Current Award Details

Name of Award (*eg Career Development Award/Postdoctoral Fellowship/ Postgraduate Scholarship*).

Commencement Date of Current Award

Name & Address of Administering Institution

	<i>Postcode</i>	
--	-----------------	--

5 **Estimated Start Date of Proposed Travel** *(Format DD/MM/YYYY)*

Estimated Completion Date of Proposed Travel *(Format DD/MM/YYYY)*

6 **Title of Proposed Program**

7 **Summary of Proposed Program** Please comment on the benefit the proposed study will have on existing award and why the proposed location and duration are appropriate to achieve the award aims.

8 Publications (*in Print, in Press and Abstracts*), Conferences attended and Presentations given since commencement of current Award.

9 Location of Proposed Training

10 The Estimated Cost and mode of Travel *Note: Tourist/economy class direct airfares are to be quoted. Applicants must justify incidental and other costs claimed.*

11 Budget Items

Estimates to be based on the guide provided to calculate the costs below

Airfares to Proposed centre	
Incidental Allowance	
Rent/Subsistence Allowance	
Compulsory fees	
Other	
TOTAL	

12 Certification by Hosting Supervisor/Head of Department

I certify that should.....be awarded a Travelling Award for Research Training, I will be willing to supervise him/her during the tenure of the award and will provide the necessary facilities.

Title

Name

Appointment

Department

Institution

Signature of Host

Date

13 Signatures*Signature of Applicant**Date****Signature of Supervisor of Applicant's Current Award in Support of this Proposal***

Title

Given Names

Surname

*Signature**Date***Signature of Head of Administering Institution**

I certify that should be awarded a Travelling Award for Research Training this institution/university will administer the funds on behalf of the grantee, relative to all travel and expenses incurred during the tenure of the travelling research training.

Name of Institution/University**Signature and Designation of Authorised Person**

Title

Given Names

Surname

Signature of Authorised Person*Date*