FOR OFFICE USE ONLY

AMOUNT AWARDED

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| **Application for St. Catharine’s College Graduate Travel and Research Funds**  **Part I – To be completed by the applicant** | | | |
| Name of applicant: |  | Email address: |  |
| Degree (e.g. PhD/MPhil): |  | Year of study: |  |
| Subject (e.g. English): |  | | |
| **1. Application details**  **1a. Reason for travel or research expenditure; relevance for and importance to research or course study:** | | | |
|  | | | |
| **1b. Have you received any contributions from other sources towards these costs? If so, please give details:** | | | |
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| **1c. Are you applying to any other sources for a contribution towards these costs? If so, please give details including amount applied for and expected date of decision on funding from these sources:** | | | |
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| **2. Details of expenditure**   1. **For travel, summary of travel itinerary (location, dates) and costs (please provide full breakdown of all travel and subsistence expenditure).** 2. **For research expenditure, details and costs of each item required.**   *NB Research equipment costs are generally deemed to be a departmental responsibility: please only apply for equipment in exceptional cases, stating why the department cannot fund this item.*  *The Graduate Fund does not cover membership fees to organisations.* | | | | | | |
| Travel dates and destination: | |  | | | | |
| Conference fees: | |  | | | | |
| Accommodation: | |  | | | | |
| Travel costs: | |  | | | | |
| Other costs and further details: | | | | | | |
| External funding secured (See 1b): | | £ | | | | |
| Funding sought elsewhere (See 1c): | | £ | | | | |
| Total cost: | | £ | | Amount of College contribution sought: | |  |
| **3. Payment details and confirmation**  We will pay any successful awards directly into a UK bank account. Please provide details of your current bank account below: | | | | | | |
| **BANK DETAILS** | | | | | | |
| Name of bank: | | |  | | | |
| Address of bank: | | |  | | | |
| Sort Code: | | |  | | | |
| Account number: | | |  | | | |
| Name on the account: | | |  | | | |
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| **I confirm that the information which I have given on this application is complete and true** | | | | | | |
| Signature |  | | | Date |  | |

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| Part II – To be completed by the supervisor | | | | | | | | |
| Name of Supervisor: |  | | | | Email: | |  | |
| Student you are supporting: | | |  | | | | | |
| Department/Faculty/Research Group: | | | |  | | | | |
| Please provide a brief assessment of the relevance of this project for the student’s research/course: | | | | | | | | |
|  | | | | | | | | |
| **Why cannot this project be funded by your Department/Faculty/Research Group? (if some of the project is funded via Department resources, please explain why it could not be funded in full).** | | | | | | | | |
|  | | | | | | | | |
| Supervisor’s signature: | |  | | | | Date: | |  |
| Once completed, please send this application form to:  Graduate Administrator, St Catharine’s College, Cambridge.  Email: [Grad.admin@caths.cam.ac.uk](mailto:Grad.admin@caths.cam.ac.uk) | | | | | | | | |