



| Conference details:  |                   |
|--|-------------------|
| CONFERENCE TITLE:  |                   |
| ORGANISER:   |                   |
| LOCATION:  | CONFERENCE DATES: |
| TITLE OF PAPER:  |                   |
| Estimated expenditure (in Australian dollars): Please attach supporting documentation for that estimated below, including quotation/itinerary from airline(s) etc.   |                   |
| Main Travel (airfares)   |                   |
| Local Travel (taxis, etc)  |                   |
| Accommodation  |                   |
| Subsistence  |                   |
| Other (please specify)   |                   |
| <b>TOTAL AMOUNT REQUESTED</b>  |                   |
| Agreement:   |                   |
| <p>I confirm that all information contained in the application to be true and correct and that I will inform the Faculty of Arts and Education, Higher Degree by Research Committee as soon as possible of any changes which may affect the proposed travel grant.</p> <p>Candidate Signature: _____ Date: _____</p> |                   |
| To be completed by the Principal Supervisor - This section is completed by your supervisor before forwarding the completed application to the HDR office   |                   |
| <b>TO BE COMPLETED BY THE PRINCIPAL</b>  |                   |
| Supervisor's Name: _____   |                   |
| Supervisor's Signature: _____ Date: _____  |                   |
| <b>COMMENTS</b>  |                   |
|  |                   |
|  |                   |
|  |                   |

Please return form to: **HDR Administrative Officer**  
 Faculty of Arts and Education  
 Waurm Ponds Campus  
 Deakin University Locked Bag 20000, Geelong. Vic. 3220  
 Tel: 03) 5227 2226; Fax: 03) 5227 2260  
 Email: artsed-research@deakin.edu.au

**Office Use Only:** (Research Office Approval)

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

You can use this form for both estimating costs for your application (if there is insufficient space on the application form) and for claiming reimbursement. You can use this sheet to both prior to or after attendance. For reimbursements claims please attach receipts and forward to Robyn Ficnerski, Faculty of Arts and Education, Deakin University, Locked Bag 20000, Geelong VIC 3220.

|  |   |              |
|--|---|--------------|
| <b>NAME:</b>   | Has this application been pre-approved? |              |
| <b>EXPENSE SUMMARY FOR INTERNATIONAL CONFERENCE ASSISTANCE</b>                                   |   |              |
|  | <b>LOCAL CURRENCY</b>                   | <b>\$AUD</b> |
| <b>Fares</b> (including airfares and local fares)  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
| <b>SUB TOTAL</b>   |   |              |
| <b>Accommodation</b>   |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
| <b>SUB TOTAL</b>   |   |              |
| <b>Conference registration</b>   |   |              |
|  |   |              |
| <b>SUB TOTAL</b>   |   |              |
| <b>Food</b> (please itemise below)   |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
| <b>SUB TOTAL</b>   |   |              |
| <b>Other</b> (please provide additional sheet with itemized items if two lines are insufficient) |   |              |
|  |   |              |
| <b>SUB TOTAL</b>   |   |              |
| <b>TOTAL</b>   | TOTAL FOR THIS COLUMN NOT REQUIRED      |              |