



CXS Travel Award Application

Contact Information

Name	
Street Address	
City Post Code	
Home Phone	
Work Phone	
E-Mail Address	

Supervisor's Certification

I hereby affirm that this applicant is currently enrolled student and CXS member working under my supervision and that the student makes regular contributions to the scientific life of CXS by participating in CXS activities.

Signed:

Date:

Purpose of Application

Name of conference and type (poster/talk) and title of presentation at conference.

Description of Proposal

Explain how the proposed trip will contribute to completion of your work.

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Location and Dates for Conference

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Budget

Travel Type	
Travel Costs	
Accommodation Type	
Accommodation Costs	
Meal Costs	
Other Expenses	

Other Funding Sources

Describe other sources of funding applied for/secured:
Amount applied for/secured:

Supporting Document Checklist

Information describing conference including preliminary program and registration (brochure or website printout)	
Copy of your abstract	
Travel quotes or receipts	
Accommodation quotes or receipts	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted for a CXS Travel Award, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate withdrawal of this

application and I may be subject to disciplinary action.

Name (printed)	
Signature	
Date	

Return this Application to:

Ms Tania Smith
Chief Operating Officer
ARC Centre of Excellence for Coherent X-ray Science
University of Melbourne
School of Physics
Parkville VIC 3010
cxsenquiries@unimelb.edu.au

TEL: 03 8344 7403

NOTE: Funds may be made available to assist students to attend national or international conferences at which they are making a presentation.

OFFICE USE ONLY

Application Approved/Not Approved	
Authorized Approvers Signature	
Amount Approved	
Reimbursement to Student (name)	
Account Code	