The Kids Brain Health (formerly NeuroDevNet) Trainee Conference/Travel Scholarships are a way for us to connect with trainees interested in developmental neurosciences. As such these event-travel awards are offered to those trainees that have joined our trainee network (as an Associate Trainee or Network Trainee) and become active in Network training events.

We are offering up to 20 travel scholarships/year (up to $500) to help offset the cost of attendance at one of these conferences. Applications are reviewed twice per year for Fall&Winter and Spring&Summer (deadlines can be found on the KBHN Training Program Website).

Eligibility:

* Applicants must be a Network/Associate Trainee Member.
* Trainees may only receive one travel scholarship (and only two awards allowed per Supervisor) per calendar year
* You may apply before receiving acceptance to present at a conference.
* Priority will be given to those trainees presenting at conferences or workshops. If not presenting, however, the applicant/supervisor should provide a strong justification for attending conference/workshop or how attending a course will directly benefit your career development.

Application Checklist (please attach as applicable):

* This below form page, “Application for KBHN Conference/Travel Scholarship”
* Copy of presentation abstract (either submitted or accepted)
* Cover Letter from you and your supervisor/mentor stating the benefits of attending this event for your research and/or career development
* An abbreviated Curriculum Vitae with recent publications list (Canadian Common CV format is ideal
* If applicable, confirmation of acceptance for an Oral or Poster presentation, including details regarding the presentation (e.g., title, first author)

Required reimbursement materials following travel:

* Proof of conference attendance/Meeting Program-Itinerary
* Brief statement (½-1page) sharing the highlights of the conference/workshop for you.
* Completed Expense claim form (downloaded with this application)
* Receipt issued by the conference organizer showing the amount of the paid registration fee
* Travel and or Accommodation Travel Receipts

***Section A Event Information***

Event Title:

Event Organizer(s):

Event Location:  Event Dates:

Event URL (if available):

***Section B Applicant Information***

Applicant Name:

Applicant Email:

Applicant status:

Master’s Student Doctoral Student Postdoctoral Fellow

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution/Program–Department:

Program Year:

Expected Completion Date:

Applicant Work Address:

(Building/Street)

(City) (Province) (Postal Code)

Daytime Phone Number: **(xxx) xxx-xxxx ext xxxx**

Supervisor Name:  Department:

Co-supervisor Name:  Department:

**Signatures** (e-signature accepted)

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| --- | --- |
| Applicant: | Date: |
| Supervisor: | Date: |