HOMERTON COLLEGE POSTGRADUATE RESEARCH EVENTS FUND APPLICATION FORM 2021-22

I. STUDENT DETAILS			
Name:			
Address:			
Course and subject:			
Year of study:			
Email address:			
2. RESEARCH EVENT DETAILS Please the event relates to your research. Please in			, giving details of how
,			
3. EXPECTED EXPENSES Please fill out	any relevant boxes with as much inforr	nation as possible.	
	Estimated at the time of	Documents	For Finance Office
	application Please attach documentary proof	attached Y/N	Use Only: Actual expenditure
	such as web quotations for travel,		with receipts
	estimated costs for room-booking, catering, etc.		enclosed.
Room hire:			
Travel for speaker(s):			
Accommodation for speaker(s):			
Catering:			
Other:			
TOTAL:			

4. BREAKDOWN OF FUNDING FOR EVENT Please note this total should match that of section 3.					
	Amount ap		Amount confirmed		
Sponsorship:					
Funding body:					
e.g. Research Council.					
Department/Faculty:					
Supervisor's research funds:					
Other funds:					
e.g. learned societies. Requested contribution from College:					
Requested Contribution from College.					
TOTAL:					
<u> </u>					
5. SUPERVISOR'S STATEMENT					
Dear Supervisor,					
Please could you indicate your support for this			d event is related to the student's		
research, and including the benefits to be gain	ed from its organisation?)			
Many thanks,					
Dr Melanie Keene Graduate Tutor					
SUPERVISOR'S STATEMENT OF SUPPOR	.I				
Name:					
TNAME.					
Signed:		Da	te:		
/ CTLIDENT'S STATEMENT					
6. STUDENT'S STATEMENT					
Landium that the actimated evenues listed share unament the mast same wind account have been the continued as					
I confirm that the estimated expenses listed above represent the most economical means I have been able to find					
to achieve the stated objectives.					
Signed:			ate:		
For Einance Office Hea Only	.	Dota			
For Finance Office Use Only	£	Date			
Grant Approved					
Grant Paid	1				