## Faculty of Arts Endowment Fund Application Form



Applications should be forwarded to: Chair, Faculty of Arts Endowment Fund c/o Jhonalyn Domingo, Dean's Office Assistant email to jhonalyn.domingo@umanitoba.ca

- 1. Applicants should read the General Guidelines for the Faculty of Arts Endowment Fund Program before completing this form.
- 2. The appropriate certificate/proof of approval on research involving the use of animals, human subjects or biohazards must be attached to the application or forwarded before funding will be released.

Last name:

## PART A – GENERAL INFORMATION:

First name:

I am applying on behalf of a group, department or program:	Yes No		
Name of Group (if yes above)			
Address:	City and Postal Code:		
Department:			
Applicant Category:	Email:		
Telephone:	AMOUNT REQUESTED: \$		
Certificate of approval attached (if required)	Funds received last year? YES NO		
PART B – PROPOSED USE OF FUNDS: Provide a concise, non-technical statement of how you propo of the funds and describe any benefits that may be realized for department, or the Faculty of Arts. Please add up to one add documents if appropriate.	or your program of study, your research dissemination, your		

## PART C – BUDGET SUMMARY:

Section 1 Budget Summary				
Summarize your budget. All items must be detailed in Section 2 below:				
Budget:	Total:			
Airfare /Travel (attach printed quotes from airline web pages/Concur/travel agent)				
Conference Registration Fee				
Accommodations				
Per diem (current University rates apply)				
Equipment				
Technical Assistance				
Conference organization expenses				
Materials and Supplies				
Personnel (total salaries/benefit costs)				
Student Research Assistance; Secretarial/Professional Assistance				
Other (please specify)				
Total Requested				
Section 2 Budget Justification and Explanation				
Provide a brief, clear justification for each budget item. Applicants are referred to the section "Preparing and Justifying the Budget" in the General Guidelines for applicants for assistance.				
Personnel (tasks performed/period of employment/rate of pay)				
Materials and Supplies (other than standard office supplies)				
Equipment (if not available for use within University – provide quotations if over \$500.00)				
Travel: Domestic □ International □ Destination:				
(purpose, mode, and length of trip; detail expenses for food and lodging, if applicable)				
Other				

PART D	- OTHER SOURCES OF FUNDING	3			
Funding re	eceived from other sources:		Rec'd	Applied for	
Source:	PDA/Travel (faculty members only)	Amount:			
Source:	CIHR/NSERC/SSHRC/URGP/UMGF	Amount:			
Source:	Startup Grant	Amount:			
Source:		Amount:			
Source:		Amount:			
Source:		Amount:			
Source:		Amount:			
APPLICA	NT SIGNATURE:		DATE:		
I certify that I am currently enrolled in the Department of/Program inand will be at the time any award will be paid.					
DEPART	MENT HEAD SIGNATURE:		_ DATE:		
(Required for student applications and student GROUP applications only)					
I certify that the above named student applicant is currently enrolled in the Department of/Program in and will be at the time any award will be paid.					