

# Faculty of Arts Endowment Fund Application Form



University  
of Manitoba

Faculty of Arts

Applications should be forwarded to:  
Chair, Faculty of Arts Endowment Fund  
c/o Jhonalyn Buhain, Dean's Office Assistant  
email to [jhonalyn.buhain@umanitoba.ca](mailto:jhonalyn.buhain@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.

## PART A – GENERAL INFORMATION:

First name:

Last 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 propose to use any awarded funds. Provide a rationale for the use of the funds and describe any benefits that may be realized for your program of study, your research dissemination, your department, or the Faculty of Arts. Please add up to **one** additional page of information if required. Attach supporting documents if appropriate.

## PART C – BUDGET SUMMARY:

Section 1 Budget Summary	
<i>Summarize your budget. All items must be detailed in Section 2 below:</i>	
<b>Budget:</b>	<b>Total:</b>
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
<i>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.</i>
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 <input type="checkbox"/> International <input type="checkbox"/> Destination: (purpose, mode, and length of trip; detail expenses for food and lodging, if applicable)
Other

## PART D – OTHER SOURCES OF FUNDING

Funding received from other sources:

		Rec'd	Applied for
Source:	<u>PDA/Travel (faculty members only)</u>	Amount: _____	
Source:	<u>CIHR/NSERC/SSHRC/URGP/UMGF</u>	Amount: _____	
Source:	<u>Startup Grant</u>	Amount: _____	
Source:	_____	Amount: _____	
Source:	_____	Amount: _____	
Source:	_____	Amount: _____	
Source:	_____	Amount: _____	

Applicants should briefly explain how these funds are required **in excess** of PDA/travel/startup/tri-council/Departmental/Dean's Office/Tri-Council/UMGF or URGF funds.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

I certify that I am currently enrolled in the Department of/Program in \_\_\_\_\_  
and will be at the time any award will be paid.

DEPARTMENT 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.

I/we will be honest when submitting approved expenses for reimbursement, and will only claim expenses that are not being reimbursed from any other source. I/we understand that claims may be audited.

APPLICANT SIGNATURE: