**NANYANG TECHNOLOGICAL UNIVERSITY**

**APPLICATION FOR OVERSEAS CONFERENCE LEAVE**

**WITH FINANCIAL ASSISTANCE**

**(MASTER/Ph.D. STUDENTS)**

Notes:

1. Please complete the form and submit it together with the following supporting documents on (a) and, when applicable,   
   (b) to (g) below, to your School through your Supervisor and, Associate Chair (Graduate and Continuing Education) :

(a) conference brochure/official handout on the conference.

(b) correspondence from organiser pertaining to your participation or invitation to the conference and grant of financial assistance, if applicable.

(c) correspondence regarding the acceptance of the paper.

(d) copy of the paper/abstract for conference presentation.

(e) documentary evidence of the registration fee to be paid.

(f) any other relevant documents you may deem useful in supporting your application.

(g) provide the following for **Economy** (Premium Economy Excluded)airfare quotation. Only Economy airfare can be

accepted for processing. Other classes will not be approved for reimbursement.

* Lowest quotation based on 2 quotations obtained from 2 different travel agencies, one of which is from University’s Appointed Travel (i.e., ATPI (Singapore) Pte Ltd & PriceBreaker Corporate).
* Submission of 1 airfare quotation would be allowed if the actual flight booking is from the University’s Appointed Travel agency (i.e., ATPI (Singapore) Pte Ltd or PriceBreaker Corporate).

(h) Students who are awarded the financial support may be called upon to assist the school in some assigned task (e.g., transportation and distribution of promotional material).

1. Your application must reach your School **at least 6 weeks before the commencement of the conference, or at least 6 weeks before the date that registration/other fees need to be paid (if applicable), whichever is the earlier.**

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| **PART I: TO BE COMPLETED BY APPLICANT** | | | | | | | | | | | | | | | | | | | | | |
| Name of student: | | | | | | |  | | | | | | | | | | | | | | |
| Matriculation Number: | | | | | | | |  | | | | | | | Contact No.: | | | | | |  |
| Programme Type： | | | | | | | | Master Part-Time Master Full-Time  PhD Part-Time PhD Ful-Time | | | | | | | | | | | | | |
| Start of Candidature: | | | | | | | |  | | | | | | | | | | | | | |
| For graduated Master’s student, please state Title & Date of Degree Conferred: | | | | | | | | | | | | | | | | | | | | | |
| Title of Project : | | | | |  | | | | | | | | | | | | | | | | |
| Name(s) of Supervisor(s) : | | | | |  | | | | | | | | | | | | | | | | |
| **DETAILS OF CONFERENCE** | | | | | | | | | | | | | | | | | | | | | |
| Title: |  | | | | | | | | | | | | | | | | | | | | |
| Venue: |  | | | | | | | | | | | | | | | | | | | | |
| Date: | From: | |  | | | | | | | | | | | | | | To: | |  | | |
| ORGANISER/SPONSOR: | | | |  | | | | | | | | | | | | | | | | | |
| Is conference held at regular intervals? | | | | Yes   No | | | | | | | If “yes”, please indicate frequency:- | | | | | | | | | | |
| Nature of conference participants (e.g., open to members of certain society, nominated by government, etc):  Will proceedings or reports of conference or any papers resulting therefrom be published? Yes No | | | | | | | | | | | | | | | | | | | | | |
| **PROPOSED PARTICIPATION IN CONFERENCE IS THROUGH:** | | | | | | | | | | | | | | | | | | | | | |
| **Invitation**   **Application** | | **Others (please specify):** | | | | | | | | | | | | | | | | | | | |
| **As participant of conference, the applicant will:** | | | | | | | | | | | | | | | | | | | | | |
| Read a Paper | | | | | | | | | Date Scheduled: | | | | | | | | | | | | |
| Preside at a session | | | | | | | | | Date Scheduled: | | | | | | | | | | | | |
| Be a panel discussant | | | | | | | | | Date Scheduled: | | | | | | | | | | | | |
| Others: | | | | | | | | | Please specify: | | | | | | | | | | | | |
| **DETAILS OF PAPER(S) TO BE PRESENTED AT CONFERENCE:** | | | | | | | | | | | | | | | | | | | | | |
| Presentation: Oral Poster | | | | | | | | | | | | | | | | | | | | | |
| Title: | | | | | | | | | | | | | | | | | | | | | |
| Name and Division of co-author(s), If it is a joint paper: | | | | | | | | | | | | | | | | | | | | | |
| Has paper been accepted for conference presentation? Yes No | | | | | | | | | | | | | | | | | | | | | |
| Is attendance at conference in any way connected with your consultation outside work? Yes No  If “yes”, please provide details: | | | | | | | | | | | | | | | | | | | | | |
| Please indicate usefulness of conference to yourself and the University. | | | | | | | | | | | | | | | | | | | | | |
| Period of conference leave applied from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. | | | | | | | | | | | | | | | | | | | | | |
| **Details as follows:** | | | | | | | | | | | | | | | | | | | | | |
| Purpose | | | | | | | | | | From | | | | | | | | To | | | |
| 1. For travelling to venue | | | | | | | | | |  | | | | | | | |  | | | |
| 1. For conference attendance | | | | | | | | | |  | | | | | | | |  | | | |
| 1. For travelling to Singapore | | | | | | | | | |  | | | | | | | |  | | | |
| Please indicate whether the conference leave applied for include optional workshop, tutorial and/or tour in conjunction with the conference. Yes No  If yes, please provide details, including reasons for request: | | | | | | | | | | | | | | | | | | | | | |
| Have you been sponsored by the University or funds provided through the University to attend any overseas conference?  Yes No  If yes, please provide details (for Doctoral Students, please indicate any of the sponsorship or funds has been provided before PhD confirmation obtained): | | | | | | | | | | | | | | | | | | | | | |
| Have you or your team members or supervisor(s) used the same work for application of any financial support from the school?  Yes No  If yes, please provide details, including reasons for request: | | | | | | | | | | | | | | | | | | | | | |
| **Travel Support Fund Balance for reimbursement** | | | | | | | | | | | | | | | | | | | | | |
| Current Available Amount : | | | | | | | | | | | | | | | | | | | | | |
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| **FINANCIAL ASSISTANCE**  Please refer to the School’s student conference travel support guidelines on the financial support, and indicate if you are requesting financial assistance from the School on the following (*if “No”, please indicate whether the costs will be met by your own expenses, the organizers or you have applied or will be applying for funds from external sources*): | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | Yes | No | | | If no, please indicate below how expense will be met? | | | | | |
| 1. Air passage. If yes, please indicate : Lower of either airfare quotations or actual air ticket cost incurred S$\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  | | |  | | | | | |
| 1. Overseas Daily Allowances | | | | | | | | | | | |  |  | | |  | | | | | |
| 1. Accommodation | | | | | | | | | | | |  |  | | |  | | | | | |
| 1. Conference Registration Fees of S$\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |  |  | | |  | | | | | |
| In signing this financial assistance section, you acknowledge that you are aware of the School’s conference travel support guidelines; you can claim up to the maximum approved grant provided you fulfill all the conditions stated in the School’s students conference travel support guidelines, **only economy airfare** will be accepted for processing (Other classes will not be approved for reimbursement), submit the receipts and supporting documents within two weeks of your return from the overseas trip. | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | |  | | | | | |  | |
| Signature of Applicant | | | |  | | | | | | | | | |  | | | | | | Date | |
|  | | | |  | | | | | | | | | |  | | | | | |  | |
| **PART II: APPLICANT’S ACKNOWLEDGEMENT AND UNDERTAKING**  **Note *: This section is only applicable to NTU Part-Time Graduate Students & Master Students within one year of graduation***  ***(i.e., after conferral of degree)*** | | | | | | | | | | | | | | | | | | | | | |
| As NTU does not purchase travel insurance forNTU Part-Time Graduate Students & Master students who have been conferred or graduated, please arrange your travel insurance before going on the overseas trip.  Please sign below to acknowledge that you are aware of the above, and that you need to produce the travel insurance receipt when submitting your claims for the trip. | | | | | | | | | | | | | | | | | | | | | |
| Signature of Applicant | | | |  | |  | | | | | | | | | | | | | | Date | |
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| **PART III: TO BE COMPLETED BY SUPERVISOR** | | | | | |
| Other comments, if any  Approved by : | | | | | |
| Name and Signature of Supervisor |  | |  | | Date |
| **PART IV: TO BE COMPLETED BY ASSOCIATE CHAIR, GRADUATE AND CONTINUING EDUCATION** | | | | | |
| Other comments, if any  Approved by : | | | | | |
| Name and Signature of Associate Chair |  | |  | | Date |
| **PART V: TO BE COMPLETED BY FINANCE MANAGER** | | | | | |
| Conference leave: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. \_   1. Financial Assistance;   Yes, I recommend lump sum grant of up to the maximum of S$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as per WKWSCI’s students conference  travel support guidelines.  No (Reasons): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. The financial assistance to be charged to the provided to the following fund:   C440021000 WKWSCI School Admin GL 75110070 Student Travel – Related Expenses & Allowance   C440067001 WKWSCI Student Activity GL 75110070 Student Travel – Related Expenses & Allowance   By other funds (*please state cost centre and GL)*  Cost Centre : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  GL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Signature of Finance Manager, WKWSCI | |  | |  | Date |