# HDR33 – RESEARCH CANDIDATE TRAVEL GRANT APPLICATION

This funding is available to assist research candidates with travel costs associated with research-related activities that will enhance their thesis.
Research-related activities may include the following:

* presenting at a conference
* data collection, including conducting interviews in a field location
* travel to utilise equipment or resources not available at Batchelor Institute

HDR candidates are able to receive up to $2000 during their candidature. Any expenditure beyond this amount are the responsibility of the candidate. Approval for a travel grant must be secured before any travel is undertaken as reimbursement is not available.

## SECTION 1 – **APPLICATION INFORMATION**

To be eligible to apply for, and receive, a HDR Travel Grant you must:

* be currently enrolled in a Batchelor Institute Higher Degrees by Research (HDR) program;
* have successfully completed your Qualifying/Confirmation Milestone and any subsequent Progress Reports;
* not be currently considered “under review” for unsatisfactory progress; and
* not have submitted for examination.

This application should be submitted to the Director of the Graduate School (GraduateSchool@batchelor.edu.au).

Applications should be lodged 3 months before expected travel. Retrospective requests for a travel grant or travel reimbursement will not be considered.

Recipients must abide by all requirements specified in the Higher Degree by Research Travel Guidelines [www.batchelor.edu.au/research/currentcandidates](file:///%5C%5Cbatfile01.biite.edu.au%5CLearning%20and%20Engagement%5CForms%5CResearch%20office%5CHDR33%20%E2%80%93%20Research%20Candidate%20Travel%20Grant%20Application%5Cwww.batchelor.edu.au%5Cresearch%5Ccurrentcandidates).

## SECTION 2 – PERSONAL DETAILS

|  |  |
| --- | --- |
| Given names |       |
| Phone number |       |
| Surname |       |

|  |  |
| --- | --- |
| Email address |       |

## SECTION 3 – TRAVEL DETAILS

|  |  |
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| Have you previously received a Batchelor Institute Travel Grant? | [ ]  Yes [ ]  No |
| Do you have any other funding for travel support? | [ ]  Yes [ ]  No |

If yes provide details

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|       |

Please provide a brief description of the reason for travel and its relevance to your candidature.

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If attending a conference you are required to attach to this application evidence of your paper or poster being accepted as part of the program.

Evidence attached [ ]  Yes [ ]  No

Conference details

|  |  |
| --- | --- |
| Name of Conference: |       |
| Location and Dates of Conference: |       |
| Official Conference website: |       |
| Registration Cost: |       |

Flight details

| Departing | Arrival | Estimated Cost |
| --- | --- | --- |
| Location  |       | Location  |       |       |
| Date/time |       | Date/time |       |       |
| Location |       | Location |       |       |
| Date/time |       | Date/time |       |       |
| Location |       | Location |       |       |
| Date/time |       | Date/time |       |       |
| Location |       | Location |       |       |
| Date/time |       | Date/time |       |       |
| Location |       | Location |       |       |
| Date/time |       | Date/time |       |       |

Accommodation details

|  | Estimated Cost |
| --- | --- |
| Location  |       |       |
| Preferred venue |       |       |
| Duration of stay |       |       |
| Location  |       |       |
| Preferred venue |       |       |
| Duration of stay |       |       |
| Location  |       |       |
| Preferred venue |       |       |
| Duration of stay |       |       |
| Location  |       |       |
| Preferred venue |       |       |
| Duration of stay |       |       |
| Location  |       |       |
| Preferred venue |       |       |
| Duration of stay |       |       |

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| --- | --- |
| Description | Estimated Cost |
|       |       |
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| Total Travel Grant amount being requested |       |

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| Has your primary supervisor endorsed this travel? | [ ]  Yes [ ]  No |

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| --- | --- |
| Primary Supervisor |       |

Signature Date

|  |  |
| --- | --- |
| Candidate’s name |       |

Signature Date

**Office Use**

|  |  |
| --- | --- |
| Approved by |       |

Signature Date