**Application for SAPL Research Expenses Award**

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| Name: |  |  | UCID: |  | |
| Today’s date: |  |  |  |  | |
| Program: |  |  |  |  |  |
| Year of program you are in this term: |  |  |  |  |  |
| Expected program completion date: |  |  |  |  |  |
| Title of thesis/dissertation: |  | | | | |
| Name of Supervisor: |  | | | | |

**Documentation of paid expenses is required prior to payment of award.**

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| **Freedom of Information and Protection of Privacy Act** |  |  |  |  |
| *The above information is collected under the authority of the Freedom of Information and Protection of Privacy Act, the Taxation Act (Canada) and the Statistics Act (Canada) to determine your eligibility for graduate scholarships and awards. If you are or become a student at the University of Calgary, this information will form part of the student record. Please direct any questions about the use of this information to the FOIP Advisor, Faculty of Graduate Studies – Telephone: (403) 220-5417.* | | | | |
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**Supporting Documentation**

\* Application form

\* A one page description of the thesis or dissertation which should include brief background, scholarly context, research questions and objectives, and methods;

\* A one page work plan and budget justification with itemized budget

Save these documents as a single pdf. Name the file:

**Last name\_SAPL Research Expenses Award**

Send to awards@sapl.ucalgary.ca

\*Letter of support should be emailed directly by your supervisor to **awards@sapl.ucalgary.ca**