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| **Birrell-Gray Travelling Scholarship Application Form** | | | | | | | | | Logo_UoE_Vet_2_colour_October2014 | | | | |
| These Scholarships are available to PhD, MPhil and Clinical Scholars registered with R(D)SVS | | | | | | | | | | | | | |
| **The completed form with supporting documents should be submitted to** [**RDSVS.PGR.Admin@ed.ac.uk**](mailto:RDSVS.PGR.Admin@ed.ac.uk) | | | | | | | | | | | | | |
| Applicant’s name: | | | |  | | | | | | | | | |
| Degree registered for: | | | |  | | | | | | | | | |
| Date of commencement: | |  | | | | | | Expected date of completion: | | | |  | |
| Division / Institution Address: | |  | | | | | | | | | | | |
| Tel. No.: | |  | | | | | | Email address: | | | |  | |
| Have you had a previous award(s)?  *If YES please advise the purpose, amount and date of award* | | YES / NO | | | | If to attend a conference, what did you present? PAPER / POSTER | | | | | | | |
| State the subject and objective of your research project: | | | | | | |  | | | | | | |
| How is the project funded? Name of funding source: | | | | | | |  | | | | | | |
| Are you based at an Associated Institution?  (e.g. MRI, SRUC, Marine Scotland) | | YES / NO | | | | If YES are they providing funds in support of this proposal? | | | | YES / NO | | | |
| Is this award to be used for attending a Conference? | | YES / NO | | | | If YES, what are you presenting? PAPER / POSTER  If NO please complete ‘other attendance’ below | | | | | | | |
| Title of paper/poster: |  | | | | | | | | | | | | |
| State the name of the Conference together with dates and location: | | | | |  | | | | | | | | |
| Other attendance (please give details) | |  | | | | | | | | | | | |
| Have you applied for funding elsewhere? | | YES / NO  *If YES please give details* | | | | | | | | | | | |
| **Total** amount for which application is now made, including anticipated expenditure on: | | | | | | | | | | | **£** | | |
| **Travel** | | | | | | | | | | | £ | | |
| **Registration Fee** | | | | | | | | | | | £ | | |
| **Maintenance** | | | | | | | | | | | £ | | |
| **Money obtained from other sources** Please list each source separately | | | | | | | | | | | £ | | |
| **SIGNATURE Applicant** | | |  | | | | | | | | Date | |  |

**Continued overleaf**

**THIS SECTION MUST BE COMPLETED**

|  |  |  |  |
| --- | --- | --- | --- |
| **Comments from Principal Supervisor** | Is the application supported? YES / NO | | |
| Please give reason(s) for your opinion |  | | |
| **SIGNATURE  Principal Supervisor** |  | | |
| Type or print name |  | Date |  |
| **SIGNATURE  Head of Division / Institution PG Advisor** |  | Date |  |

**Incomplete forms will not be considered**

It is the applicant’s responsibility to inform the SPGSC of the results of applications   
to other funding sources

SPGSC

February 2017