

# HOMERTON COLLEGE POSTGRADUATE RESEARCH EVENTS FUND APPLICATION FORM 2023-24

| 1. STUDENT DETAILS  |  |
|---------------------|--|
| Name:               |  |
| Address:            |  |
| Course and subject: |  |
| Year of study:      |  |
| Email address:      |  |

| 2. RESEARCH EVENT DETAILS <i>Please describe below what you will be using the funds for and why, giving details of how the event relates to your research. Please include dates and locations for all events.</i> |
|---|
|   |

| 3. EXPECTED EXPENSES <i>Please fill out any relevant boxes with as much information as possible.</i> |  |                           |   |
|--|--|---------------------------|---|
|  | Estimated at the time of application<br><i>Please attach documentary proof such as web quotations for travel, estimated costs for room-booking, catering, etc.</i> | Documents attached<br>Y/N | For Finance Office Use Only:<br><i>Actual expenditure with receipts enclosed.</i> |
| Room hire:   |  |                           |   |
| Travel for speaker(s):   |  |                           |   |
| Accommodation for speaker(s):  |  |                           |   |
| Catering:  |  |                           |   |
| Other:   |  |                           |   |
| TOTAL:   |  |                           |   |

4. BREAKDOWN OF FUNDING FOR EVENT *Please note this total should match that of section 3.*

|  | Amount applied for | Amount confirmed |
|--|--------------------|------------------|
| Sponsorship:                                   |                    |                  |
| Funding body:<br><i>e.g. Research Council.</i> |                    |                  |
| Department/Faculty:                            |                    |                  |
| Supervisor's research funds:                   |                    |                  |
| Other funds:<br><i>e.g. learned societies.</i> |                    |                  |
| Requested contribution from College:           |                    |                  |
| TOTAL:   |                    |                  |

## 5. SUPERVISOR'S STATEMENT

Dear Supervisor,  
Please could you indicate your support for this application, confirming that the proposed event is related to the student's research, and including the benefits to be gained from its organisation?  
Many thanks,  
Dr Melanie Keene  
Postgraduate Tutor

## SUPERVISOR'S STATEMENT OF SUPPORT

Name: \_\_\_\_\_

Signed:

Date:

## 6. STUDENT'S STATEMENT

I confirm that the estimated expenses listed above represent the most economical means I have been able to find to achieve the stated objectives.

Signed:

Date:

| For Finance Office Use Only | £ | Date |
|-----------------------------|---|------|
| Grant Approved              |   |      |
| Grant Paid                  |   |      |