**University of Windsor, Faculty of Nursing**

**SOS Conference Presenter Fund**

Peer-reviewed conferences are important venues for Knowledge dissemination and knowledge translation in Nursing. Engagement in and contribution to such conferences fulfils a critical role in strengthening the individual and collective portfolios of our Faculty members. Such engagement is also a vital component of our individual and collective scholarship that is evaluated by representatives of the broader nursing and scientific communities, for example, by reviewers of grant, tenure, and promotion applications. Although the University of Windsor provides annual travel funds to support participation in these conferences, insufficiency of these funds may sometimes compromise the ability of faculty members to present their research and/or scholarly work at such conferences. As a result, I am pleased to announce the creation of the “SOS Conference Presenter Fund.” This fund will total $3,000/year to support faculty members who may have insufficient available travel funds to present at a peer reviewed conference. The conditions for this fund are as follows:

1. The fund will be available only to full time faculty members who have ***presentations accepted at peer review conferences***. Attendance alone does NOT qualify for this fund. If a member applies to present at a conference but the presentation submission is rejected, the member cannot use funds from this program even if they have been already approved.
2. The presentation **SHALL NOT** be one that has already been presented at another conference (i.e., only first time presentations are eligible).
3. The fund shall cover shortages in the faculty member’s available travel fund. It cannot be used instead of available travel funds.
4. The maximum amount allowed **per individual presentation** shall NOT exceed $1,000 regardless of the number of presenters on the paper.
5. A faculty member can benefit from this program **only once** during any given calendar year.
6. Preference will be given to individuals who have not yet accessed the funds
7. A faculty member who wishes to apply for this fund must complete the enclosed application form
8. Potential recipients of the program shall complete and submit the application form below to the Research Leadership Chair (RLC) at least 4 weeks before the date of the conference, with documents pertaining to the conference and their presentation.
9. An accounting of all encountered expenses shall be submitted using the University of Windsor Travel Expense Form
10. Any unspent funds shall be refunded to the RLC

**SOS Conference Presenter Fund**

*(If filling an electronic form, please double click the right box below to check it off)*

Name of Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of appointment:

[ ]  Tenured [ ]  Tenure track [ ]  Limited Term [ ]  AAS

Name of the Research Conference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of the Research Conference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of the Research Conference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of the Research Presentation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of the research presentation

[ ]  Poster [ ]  Oral/Podium [ ]  Symposium

At how many conferences did you present during this academic year?

[ ]  None [ ]  1 [ ]  2 [ ]  3 or more

Is the conference peer reviewed?

[ ]  Yes [ ]  No

Is it a nursing conference?

[ ]  Yes [ ]  No; if no, please specify discipline

Attach a copy of the presentation abstract along with this application

Attach information/evidence of event, or letter of acceptance of paper

***Expenses***

|  |  |  |
| --- | --- | --- |
|  | Anticipated Expenses | Amount |
| 1 | Transportation | $ |
| 2 | Accommodation  | $ |
| 3 | Meals | $ |
| 4 | Registration | $ |
| 5 | Other (specify) | $ |
| 6 | Total | $ |

***Balance***

|  |  |  |
| --- | --- | --- |
|  | Fund | Amount |
|  | Funds available at your regular travel fund | $ |
|  | Funds needed for this conference | $ |
|  | Outstanding balance requested (row 6 of the expenses table above) | $ |

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_