

The Faculty of Medicine Student Travel Award Application Form



Background Information

The Student Travel Award Fund, was established with a generous donation by Dr. William Devlin MD'88 and Ms. Molly Brennan. Valued at a portion of the income on the endowment, the Award(s) are designed to encourage and enable medical students to present scholarly papers at conferences or other professional meetings.

The Award size will depend on the amount requested by the applicant and/or determined to be appropriate by the Dean. One or more Awards may be distributed at any time at the Dean's discretion. To be eligible, candidates must be full-time medical students (MD) in the Faculty of Medicine, in good academic standing. They must be presenting a scholarly paper at a conference or professional meeting.

Preference will be given to students who have financial need, and have not obtained funding from any other source.

Requirements

Applicants must:

1. Be a full-time student of the Undergraduate Medical Education Program.
2. Meet scholarship standing as defined by the university.
3. Be presenting a scholarly paper at a conference or other professional meeting this current scholarship year.
4. Attach proof that they are presenting at this conference or meeting.
5. Attach their travel request form to confirm financial requirements of the trip.
6. Optional: Submit a [bursary application form](#) to state financial need.
7. Complete this application form.
8. Submit all documents via email to ScholarshipsUGME@mun.ca.

Application forms must be signed and completed in full by the student. Incomplete or improperly prepared application forms disqualify the student from the competition.

Applicant Information

Name: Student Number:

Mailing Address:

Email: Phone Number:

Year of Medical School:

Are you presenting at a conference / meeting this current scholarship year? Yes No

Please name the conference/meeting you will be attending:

What are the dates of this conference:

Have you attached proof that you are presenting? Yes No

Have you applied for, or received, funding from other sources to attend this conference? Yes No

If yes, please indicate the total amount of funding received:

Please confirm the funding required in order to attend the conference:

Applicant Signature: Date:

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Write a short essay explaining what you hope to achieve or gain from this experience?
(300 words maximum)

Contact Us

If you have any questions or concerns regarding this application, please contact the Memorial University, Faculty of Medicine Scholarships Administrator at ScholarshipsUGME@mun.ca.