CONTRACT FACULTY CONFERENCE TRAVEL FUND (CUPE 3903)

Deadline: October 1
March 1
June 1 (CONFERENCE TRAVEL FUNDING ONLY; research grants not included)

If the deadline date falls on a Saturday, Sunday, or statutory holiday, applications will be accepted on the next working day. Applications received after the deadline will be sent to the committee marked late.

PLEASE NOTE: Normally, retroactive applications will not be considered.

CHECKLIST:

Each application should include:

☐ A invitation, acceptance of paper(s) and/or a copy of the program
☐ A completed Chair Endorsement Form (form attached herewith)
☐ An up-to-date CV
☐ A completed Teaching Record Form
☐ An official letter from a travel agency quoting airfare
☐ A completed application form with signature

PLEASE NOTE: An ORIGINAL PLUS FOUR copies of the application and all supporting documents are required.

Please address all correspondence to:
Contract Faculty Funding Committee
c/o Faculty Relations

Faculty Relations, C12 East Office Building,
York University, 4700 Keele Street, Toronto, Ontario, M3J 1P3
Tel: (416) 736-5518 Fax: (416) 736-5649 Email: ldiniz@yorku.ca
Contract Faculty Conference Travel Fund (CUPE 3903)  
Application Form

*Please refer to committee guidelines appended to this application.

NAME: ____________________________________________

EMPLOYEE NUMBER: ____________________________________________

DEPARTMENT AND FACULTY: ____________________________________________

CAMPUS ADDRESS: ____________________________________________

HOME ADDRESS: ____________________________________________

POSTAL CODE: ____________________________________________

TELEPHONE (OFFICE): ____________________________________________

TELEPHONE (HOME): ____________________________________________

GENERIC RESEARCH ACCOUNT NUMBER: ____________________________________________
(If you have received funding previously from this committee you will have a generic research account)

AMOUNT REQUESTED: ____________________________________________

CONFERENCE/MEETING NAME, DATE AND LOCATION:
__________________________________________
__________________________________________
__________________________________________

IF YOU ARE PRESENTING A PAPER AT THIS CONFERENCE/MEETING, PLEASE INCLUDE LETTER OF INVITATION, ACCEPTANCE OF PAPER AND/OR COPY OF THE PROGRAMME WHICH DEMONSTRATES AFFILIATION WITH YORK UNIVERSITY.
BUDGET DETAILS
(Please provide a detailed budget in the space provided below)

Airfare: Please attach an official letter from a travel agency quoting airfare for the least expensive fare and indicate its basis (APEX, Charter or Seat Sale).

Please Note: In order to ensure a fair distribution of the available funds, normally a maximum of $100.00 per night is allowed for accommodation and $50.00 per diem for meals and other expenses. Please prepare your budget accordingly.

TOTAL: $ _____________________
GRANTS PREVIOUSLY RECEIVED FROM THIS COMMITTEE:

DATE OF AWARD: ____________________________________________

AMOUNT RECEIVED: _________________________________________

CONFERENCE ATTENDED: _____________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

Signature of Applicant    Date
# Teaching Record at York

Name of Applicant:  

Campus Address:  

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The Contract Faculty Conference Travel Fund supports contract faculty members of the University attending scholarly/professional/artistic conferences as per Article 15.15 of the CUPE 3903 Collective Agreement.

1. The Conference Travel Grants are available to UNIT II members only. Applicants must hold or have held a position other than a Tutor 3 (Marker/Grader) position in the bargaining unit within ten months preceding the application deadline.

2. Normally, eligible faculty will NOT be awarded MORE THAN ONE grant per year.

3. Applications must include details of the meeting or conference with supporting letter(s) of invitation, acceptance of paper(s) and/or a copy of the program, which should demonstrate affiliation with York University, and a letter of support from the Department Chair. Applicants may apply to competitions well in advance of the conference date providing they are able to submit the necessary letter(s) of invitation, acceptance of paper(s) and/or copy of the programme. A current CURRICULUM VITAE should also be included. Preference in the allocation of awards will be made as follows: (i) individuals giving papers; (ii) individuals asked to give commentaries or to chair sessions; (iii) individuals attending conferences.

4. Eligible expenses for Conference Travel awards will be (a) travel (return economy airfare); (b) registration; (depending on the amount of the registration fee and on the availability of funds, it may not be possible to cover the full amount in every case); (c) accommodation and meals normally to a maximum of $50.00 per night for accommodations and $25.00 per diem for meals and other expenses. In an effort to distribute the available the funds to as many applicants as possible, normally the maximum AMOUNT REQUESTED SHOULD NOT EXCEED $2,000.

5. All monies awarded are subject to the regular research accounting procedures of the University. Expense reports must include the airline ticket stub, and other receipts when appropriate and should be submitted to Research Accounting, Suite B, East Office Building.

6. A brief report shall be made to Faculty Relations not later than one year after the award.

7. Please submit your original PLUS FOUR COPIES of your application and supporting documents to Faculty Relations, C12 East Office Building.

8. Please complete the attached record of your teaching at York (or you may submit a copy of a blanket application) for the 12 month period ending August 31st preceding the application deadline.

9. THE DEADLINE DATES FOR THE APPLICATION ARE:

   OCTOBER 1
   MARCH 1
   JUNE 1
ENDORSEMENT BY DEPARTMENT CHAIR

After completing the above application, please submit an **ORIGINAL PLUS FOUR** copies along with the supporting documents directly to Faculty Relations.

In addition, you should submit a copy of your application to the Chair of your department along with this endorsement form. The Chair will forward this endorsement under separate cover to Faculty Relations.

NAME OF APPLICANT: ____________________________________________

I have read this application and rank its priority as follows:

☐ Very High
☐ Fairly Low
☐ Moderate
☐ Low

COMMENTS:
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________
________________________________________________________________

________________________________________________________________

Department Chair Signature __________________________ Date __________

Please return to:

Contract Faculty Funding Committee
c/o Faculty Relations
C12 East Office Building