Physiology and Pharmacology: Symposium and Meeting Grant

Rationale: This program is intended to support/sponsor conferences or other events deemed of benefit to its members and trainees in order to help raise community and national awareness of the Department of Physiology and Pharmacology.

Eligibility:

- The applicant must be a full member of the Department and should normally be the Chair or designated organizer of the session.

- Conference or session content should be relevant to the research and training goals, or deemed of interest to faculty or trainees of the Department of Physiology and Pharmacology.

- There should be an avenue for raising awareness of the Department (e.g., Physiology and Pharmacology logo in program/slides of the session, mention of the Departmental support in the opening remarks).

- Normally, the location of the meeting should be within the Province of Alberta and preferably local to the Calgary area.

Use of Funds:

- Funds are provided to the meeting organizers and are unrestricted in their use.

- Ideally, these costs would support travel for speakers of the session, or support for trainees (e.g. registration waivers, travel costs, presentation awards).

- The maximum amount available for a conference, symposium or workshop is $1,500.00*

*Subject to the availability of funds

Application Process:

- Applications are to be submitted to the department at physphar@ucalgary.ca

- Applications will be assessed by the Department Executive. Both the requested amount and the potential exposure benefits in the context of the overall budget will be evaluated. Successful applicants will receive a Notice of Award from the Department Head with further instructions for the transfer/collection of funds.
Physiology and Pharmacology Symposium and Meeting Grant Application

Name of Conference: __________________________________________________

Name of Sponsoring Organization: _______________________________________

Meeting location: ______________________________________________________

Expected numbers of attendees (including trainees): _______________________

Primary Use of Funds: _________________________________________________

____________________________________________________________________

The primary audience (e.g., researchers, clinicians, knowledge users):_______

____________________________________________________________________

____________________________________________________________________

How will the department be recognized as a sponsor? (e.g., logo in program, mention of the Department in the opening remarks)

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Please attach the tentative program, including names of speakers and titles of talks.

____________________________________________________________________

Signature of Applicant     Date