

## STELLENBOSCH UNIVERSITY FACULTY OF MEDICINE AND HEALTH SCIENCES



# UNDERGRADUATE CONFERENCE PRESENTATION FUND APPLICATION FORM (UCP-02-2020)

- (a) Before completing this form, applicants are expected to first read and understand the <u>regulations</u> of the Undergraduate Conference Presentation and Publication Incentive Fund.
- (b) This application must be completed and submitted <u>electronically</u>.
- (c) There are 7 sections and 8 pages in this application form. Ensure that <u>all sections</u> of the form are completed. NB: Applications that do not adhere to word count limitations may be rejected.
- (d) In addition to this completed application form, the following <u>supporting documents</u> or copies of these documents should be attached to the application as appendices, in PDF format, marked as follows:

Appendix A: Proof of registration for an undergraduate degree with the Faculty of

Medicine and Health Sciences.

**Appendix B:** Ethics approval letter from the Health Research Ethics Committee (HREC).

**Appendix C:** The official announcement, advertisement or invitation of the conference.

**Appendix D:** The draft or final **conference programme** (if the programme is not yet

available, this should be mentioned on the Checklist. The programme should

be submitted as soon as it becomes available).

**Appendix E: Proof of acceptance** of the submitted abstract for a poster or oral

presentation at the conference (if proof of acceptance is not yet available, this should be mentioned on the Checklist. Proof of acceptance must be submitted as soon as it is received from the conference organisers).

**Appendix F:** Written **proof of conference registration fees** payable (<u>not</u> proof of

payment).

- (e) All applicants are required to obtain electronic sign off from their primary supervisors *prior* to submitting their applications (section 7).
- (f) NOTE: Applications should be submitted BEFORE a conference takes place. No ex post facto applications will be considered.
- (g) There are <u>two calls for applications</u> during the year, closing <u>1 May</u> and <u>1 October</u> annually, provided that a call is officially announced.
- (h) If successful, applicants will be required to submit a progress report within 1 month after the conference. Successful applicants may also be requested to make themselves and/or their group members available for a short video speaking about their *experience* of doing research, which may be posted on the Undergraduate Research Office website.

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## **CHECKLIST & MOTIVATION**

Name:	30	udent number:
Please indicate that you have submitted al application:	l the requir	red documentation together with this
Application requirements	Yes/No	If no, please explain
SIGNED application form		
Appendix A: Proof of registration		
Appendix B: Ethics approval letter		
Appendix C: Official announcement		
Appendix D: Conference programme		
Appendix E: Proof of acceptance		
Appendix F: Proof of fees payable		
Please provide a <b>motivation</b> for why you wi	sh to receiv	
Conference Presentation Fund to present yo	our researcl	<u>h</u> (maximum 300 words).
This should include:		
<ol> <li>a motivation for why you are reques</li> <li>a motivation regarding the value of properties</li> </ol>	•	eed of financial support, and this particular

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#### **SECTION 1: APPLICANT DETAILS**

SURNAME			FIRST I	NAME	
DEGREE			STUDE	NT NUMBER	
YEAR OF REGISTRATION (e.g. 2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> )					
DIVISION / CENTRE					
DEPARTMENT					
GENDER (for reporting)					
RACE (for reporting)					
DISABILITY					
DATE OF BIRTH					
LANDLINE NUMBER:	CELL	PHONE NUMBER	<b>!:</b>	E-N	MAIL ADDRESS:
POSTAL ADDRESS					
	•	SUPERVISORS' DE	TAILS		
PRIMARY SUPERVISOR'S NAM	ΛE				
PRIMARY SUPERVISOR'S UT ( NUMBER	SU)				
PRIMARY SUPERVISOR'S DEPARTMENT:		PRIMARY SUPE	RVISOR	'S EMAIL:	PRIMARY SUPERVISOR'S TELEPHONE:
SECONDARY SUPERVISOR'S N	IAME				
SECONDARY SUPERVISOR'S UT (SU) NUMBER					
SECONDARY SUPERVISOR'S DEPARTMENT:		SECONDARY SUPERVISOR'S EMAIL:			SECONDARY SUPERVISOR'S TEL. NO.
IS THIS APPLICATION BEING S PROJECT?	UBMITTED	ON BEHALF OF A	STUDE	NT GROUP	

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#### **SECTION 2: DETAILS OF CONFERENCE**

INDICATE WHETHER THE CON NATIONAL OR INTERNATIONAL		NATIO	NAL		INTERNATIO	DNAL	
OFFICIAL NAME OF CONFERENCE:							
CONFERENCE ORGANISER/S							
LOCATION							
DURATION	NO. OF DAYS	FROM			то		
NATURE AND AIM OF CONFEI	RENCE AND CON	INECTION WIT	H YOUR I	FIELD OF S	STUDY:		
HAVE YOU PREVIOUSLY ATTE PRESENTED AT A CONFERENCE			YES		N	О	
IF YES, PLEASE PROVIDE DETA	AILS		_				

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#### **SECTION 3: DETAILS OF PRESENTATION**

INDICATE THE TYP	INDICATE THE TYPE OF PRESENTATION FOR WHICH AN ABSTRACT HAS BEEN SUBMITTED:							
INVITED SPEAKER	ORAL PRESENT	TATION	POSTER PRESENTATIO	ON	OTHER (please specify)			
TITLE OF PAPER / POSTER:								
AUTHORS ON PAP be presented. Unde			-	uthors on the p	paper or post	er that will		
ABSTRACT (include presentation here)	the abstract tha	t you submitted to	conference or	ganisers for ar	oral or poste	er		
IS YOUR AFFILIATION POSTER INDICATED			YES		NO			
IF NO, PLEASE EXP	LAIN:							
WAS ETHICS APPRIRESEARCH ON WH			YES		NO			
IF NO, PLEASE EXP	LAIN:							

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#### **SECTION 4: ESTIMATED COSTS**

#### **OUTLINE THE ESTIMATED COSTS RELATED TO ATTENDING AND PRESENTING AT THIS CONFERENCE**

#### Notes:

i) This budget should not exceed  $\underline{R10,000}$ , the maximum award made by the Undergraduate Conference Presentation Fund

*ii)* All travel, accommodation and subsistence costs should be calculated as per SU Travel Policy: <a href="https://www.sun.ac.za/english/Finance/Documents/Policies/REIS%20EN%20VERBLYF%20ENG.pdf">https://www.sun.ac.za/english/Finance/Documents/Policies/REIS%20EN%20VERBLYF%20ENG.pdf</a>. Bookings and claims must follow the procedures outlined in this policy.

	EXPENSE DESCRIPTION ONLY for whichever co			ESTIMA	ATED AMOUNT (R)
1. TRAVEL COST	·s				
1.1. AIR TRAVEL					
AIR TICKET (based on	official quote from pre	ferred SU p	provider)		
TRANSPORT TO AND	FROM AIRPORTS				
OTHER (specify)					
1.2. ROAD TRAVE	L				
<u> </u>					
CAR (petrol & tolls)					
OTHER (please specif	y)				
2. ACCOMMOD	ATION & SUBSISTENCE	COSTS			
ACCOMMODATION	DAYS:	@ R	per day		
SUBSISTENCE	DAYS:	@ R	per day		
OTHER (please specif	y)				
3. CONFERENCE	-RELATED COSTS				
CONFERENCE REGIST	RATION FEES				
CONFERENCE OPENIN	NG / CLOSING SUPPER	/ EVENT FE	E		
OTHER (please specif	y)				
GRAND TOTAL					
EXCHANGE RATE USE	D TO CONVERT TO RA	NDS (if app	olicable)		

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#### **SECTION 5: DECLARATION OF OTHER FINANCIAL SUPPORT**

Indicate N/A where questions do not apply

WHAT APPLICATION HAS BEEN MADE FOR FINANCIAL SUPPORT TO OTHER SOURCES THAN THIS FUND? (specify source and amount in each		IFERENCE FROM
WHAT OTHER FUNDING IN SUPPORT OF ATTENDING THIS CONFERENCE AWARDED? (specify source and amount in each case)	NCE HAS ALREADY	' BEEN
ARE YOU SUPPORTED BY A GRANT IN WHICH CONFERENCE TRAVEL	IS ALLOWED AND	BUDGETED EOD3
(specify source and amount in each case)	IS ALLOWED AND	BUDGETED FOR?
HAVE YOU PREVIOUSLY BEEN AWARDED SUPPORT FROM THE	YES	NO
UNDERGRADUATE CONFERENCE PRESENTATION FUND?		
IF YES, PLEASE INDICATE THE YEARS AND AMOUNT OF SUPPORT	YEAR	AMOUNT
AWARDED		
IF YES, HAVE YOUR REPORT(S) BEEN SUBMITTED FOR THESE	YES	NO
SUPPORTED CONFERENCE PRESENTATIONS?		
WAS THE RESEARCH ON WHICH THIS PRESENTATION IS BASED	YES	NO
FINANCIALLY SUPPORTED BY THE UNDERGRADUATE RESEARCH PROJECT FUND?		
IF YES, PLEASE INDICATE THE YEAR AND AMOUNT OF SUPPORT	YEAR	AMOUNT
AWARDED		
IF YES, HAS YOUR REPORT BEEN SUBMITTED FOR THE	YES	NO
UNDERGRADUATE RESEARCH PROJECT AWARD?		

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#### **SECTION 6: APPLICANT DECLARATION**

DECLARATION	I, the applicant, declare that the information that, if the Undergraduate Conference F will comply with the conditions of such affiliation to Stellenbosch University is compresentation and in the conference program to comply with Stellenbosch University's institution at a public forum. I further up to the Undergraduate Conference Presentation of attending the conference.	Presentation Fu an award. I wil learly indicated gramme where s policies regar ndertake to sul	Ind makes an award, I I ensure that my d on my conference e relevant. I undertake ding representing the bmit a progress report
APPLICANT SIGNATURE		DATE	

### **SECTION 7: DEPARTMENTAL SUPPORT** (to be completed by supervisor)

SUPERVISOR NAME							
AS SUPERVISOR OF THE STUDENT APPLICANT, ARE YOU IN SUPPORT OF THE ABOVE APPLICATION? (please check one)	STRONGLY SUPPORTED		SUPPORTED		NOT SUPPORTED		
PLEASE PROVIDE A BRIEF MOTIV	PLEASE PROVIDE A BRIEF MOTIVATION FOR YOUR DECISION						
Please note that supervisors will be requested to facilitate the payment of this award into an existing or new research (k) cost point (please provide k cost point below).							
Departmental k cost centre into which funds should be paid:							
SUPERVISOR SIGNATURE			D	ATE			

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