

PhD Fund - Fieldwork Grant

CHECKLIST:

Have all receipts been attached? Has evidence of application for college funding been attached? Has your supervisor signed the form?

<u>Please read the regulations carefully before completing this form. Please TYPE or complete in BLOCK CAPITALS. Please complete all sections and attach all required supporting documentation. Incomplete applications will be returned.</u>

1. Personal Information

Name:	College: USN:	
Email:	Supervisor:	
What is your year of doctoral study?		
UK National Insurance number (if you have one) if not please provide your date of birth:		
Full UK postal address:		

2. Proposal

Field work destination(s):	
Date from:	То:

Please explain how your fieldwork will contribute to your research.

3. Costs

(NP The Fund will now a contribution towards travel but not for accommod	ation or subsistance)		
(NB The Fund will pay a contribution towards travel, but not for accommodation or subsistence)			
Please give a description of costs and attach receipts. The fund can only reimburse the cheapest practical			
means of transport.			
Travel:			
(Please give details)	£		
	Total: £		
Any other expenses you wish to be taken into consideration:			
(Please give details)	£		
If you are not utilising the Conference Grant, you may ask for permission			
to include this amount to the Fieldwork Grant. Please indicate here if you			
wish to do this (Note: you must get the PhD Director to sign this form to			
show approval)			
** /			
	Total: £		
Total Expenses:	£		

Assured contributions (please give details where necessary):				
College contribution:	£			
Amounts assured from other organisations, e.g. funding body, sponsors: (Please give source and amount.)	£			
Personal contribution:	£			
Total Assured contributions	s: £			
Contributions requested but not yet assured:				
Organisation(s) applied to:				
Date(s) of decisions:				
Amount(s) requested:				
Total amount Requested from CDS Fieldwork fund	: £			
Have you previously applied to the CDS Fieldwork Fund?				
Yes No				
If yes please indicate the outcome:				
Funded Not Funded If Funded, how much did you receive? £				
Signature of applicant:	Date:			

APPLICANTS: Please pass this form to your supervisor for endorsement.

4. Supervisor's Endorsement

 Supervisor's name:

 Has the candidate successfully completed the first year registration exercise?

Supporting statement: Please include any information you believe to be relevant and cor requirements of the grant.	nfirm that the student has fulfilled the
Signature of Supervisor:	Date:
Signature of PhD Director: (If merging grants)	Date:

<u>This form should be returned to Centre of Development Studies office, 7 West Road, or</u> <u>emailed to devstudies-adm@lists.cam.ac.uk</u>