

AUSTRALIAN INSTITUTE OF PHYSICS

ABN 81 004 566 509

Victorian Branch



Application Form for Financial Support to attend Conferences

Financial support is available from the Victorian Branch of the AIP for Victorian students to attend conferences outside Victoria, in areas directly related to physics.

To be eligible you must:

- be a bona fide student
- be a financial member of the AIP
- apply for support using this form **IN ADVANCE OF THE CONFERENCE.**
- submit original receipts **AFTER** the conference
- submit a brief report (< one page) on the conference with the receipts

Support will not be offered to the same student more than once in any calendar year, except where one of the conferences is an AIP Congress.

Financial support for students is not guaranteed, and when it is offered it is contingent on the above conditions being met. The level of support may vary depending on demand, and the level of participation at the conference.

To apply, send a completed copy of the application form to the Honorary Secretary of the AIP Victorian Branch. (The address can be found in *The Physicist* or on the Victorian branch web page.)

Provided the first three conditions are met, the support may be provisionally approved by the Branch Committee at its next meeting, pending the submission of receipts. For faster payment of support following the conference, receipts can be sent directly to the Branch Treasurer (see the Victorian branch web page). Original receipts will be returned.



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**APPLICATION FOR SUPPORT
TO ATTEND CONFERENCE**

Name:	
Address (to which cheque for support should be sent):	
	Postcode
Email address:	
AIP Membership number:	
Tertiary Institution:	
School or Department:	
Degree you are studying for:	
Full or Part Time (mark one):	
	FT _____ PT _____
Name of supervisor:	
Name of conference:	
Location of conference:	
Conference dates:	
Level of participation:	
	Attending_____ Poster_____ Talk_____ Invited talk_____
Estimated expenses:	
	Conference Registration \$ _____
	Accommodation \$ _____
	Travel \$ _____
	TOTAL \$ _____
Expected financial support (other than AIP) \$ _____	
Applicant's signature .	
	Date
Supervisor's signature	