





APPLICANT INFORMATION	
Name	Program
TMU E-mail	Supervisor
Expected Completion Date	Year of Study
EVENT INFORMATION	
Event Name	
Event Location and Date	

Event Location and Date		
Please provide a short description (1 paragraph) that describes the proposed project/event and indicate how graduate students will be engaged		

FUNDING SOURCES				
Amount requested from the Faculty of Arts		in a firm de facus t	h air.	
Maximum of \$200 per academic year; applicants program up to the maximum requested	must nave matcn	ing junas from t	neir	
Are you receiving any other funding sources?	Please indicate t	the amount		
Student Life - Student Initiatives Fund	Yes	No	Amount:	
Support from Course Union	Yes	No	Amount:	
Support from Department	Yes	No	Amount:	
Support from Program	Yes	No	Amount:	
Other:	Yes	No	Amount:	

Please provide a brief event budget including f	anding sources and specific cost estimates
SPONSOR ACKNOWLEDGEMENT	
Please indicate how the Faculty of Arts contrib	ution will be acknowledged:
(Example: Using the Faculty of Arts logo on ma	rketing materials)
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EVENT BUDGET

DATE

Completed and signed application forms should be sent to Graduate Administration & SRC Coordinator Alvin Ying (aying@torontomu.ca). For more information on the Graduate Student Grants, please consult the Faculty of Arts Graduate Student Funding and Awards website.

Important - Please retain all original receipts.

DATE