SoTL Travel Dissemination Fund - 2024-25	Applications - Grant Application Form	
Section A: Preparation and Principal Investigator Information		
 * 1. Before completing this form, please ensure upload: Summary of your SoTL project that can be posted on a public-facing website (2-3 sentences) Brief description of your project and its outcomes (maximum of 500 words) Dissemination Audience (e.g. scholarly society, external community, etc.) Location for Dissemination Justification for audience and location (Approximately 300 words) * 2. Principal Investigator (PI) Name * 3. Department 	e you have the following documents ready to Brief description of how results from your project are/will benefit TRU learners (Approximately 150 words) Brief description of how results from your project are/will benefit external audiences (e.g. educators or researchers external to TRU) (Approximately 150 words) Completed Budget form (template available on CELT website) Names and details for your co-investigators (including student co-investigators), if any	
 * 4. TRU Faculty / School Faculty of Education & Social Work Bob Gaglardi School of Business and Economics Faculty of Science School of Trades and Skills Faculty of Adventure, Culinary Arts and Tourism Other (please specify) * 5. TRU Employment Status Limited Term Contract (LTC) that continues beyond Tenure Track Tenured Other (please specify) 	 Faculty of Arts Faculty of Law School of Nursing Faculty of Student Development 	

* 6. Position

() Assistant Professor / Assistant Teaching Professor or equivalent rank

🔿 Associate Professor / Associate Teaching Professor or equivalent rank

() Full Professor / Full Teaching Professor or equivalent rank

◯ Instructor

Other (please specify)

* 7. Work Pattern

○ Bipartite

◯ Tripartite

Other (please specify)

* 8. TRU E-mail address

SoTL Travel Dissemination Fund - 2024-25 A	Applications - Grant Application Form	
Section B: Co-Investigator 1		
Leave this section blank if there are no co-investigators for your project. 9. Name		
10. Department		
 11. Is your co-investigator affiliated with TRU? Yes No 		
12. Faculty / School. Note: If your co-investigator is not affiliated wi institution.	th TRU, use the "Other" box to identify their	
○ Faculty of Education & Social Work	Faculty of Arts	
O Bob Gaglardi School of Business and Economics	C Faculty of Law	
Faculty of Science	◯ School of Nursing	
◯ School of Trades and Skills	Faculty of Student Development	
Faculty of Adventure, Culinary Arts and Tourism		
Other (please specify)		
13. Position		
14. E-mail address		
15. If there are additional co-investigators for this project, please list them here, including their names, departments, institutions, positions, and e-mail addresses.		

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Section C: Project Details

* 16. Project Title

* 17. Summary of your SoTL project that can be posted on a public-facing website (2-3 sentences).

* 18. Brief description of your project and its outcomes (maximum of 500 words; 3500 characters).

* 19. Dissemination audience (e.g. name of scholarly society or external community)

* 20. Location for Dissemination

City/Town
State/Province
Country

* 21. Justification for audience and location (Approximately 300 words)

* 22. Brief description of how results from your project are/will benefit TRU learners (Approximately 150 words)

* 23. Brief description of how results from your project are/will benefit external audiences (e.g. educators or researchers external to TRU) (Approximately 150 words)

* 24. I confirm that I understand, and agree to, the following conditions:

- Travel funded through the SoTL Dissemination Fund is for projects that have secured ethics approval or are confirmed to be ethics review exempt.
- Any funds not transferred into a research account by March 1 of the funding year (e.g. March 1, 2025 for the 2024-2025 competition) will be forfeit.
- Grant holders are responsible for ensuring that any expenses incurred to grant account are eligible based on the SoTL Dissemination Funding Guidelines, and that all expenditures adhere to TRU policy.

) Yes

🔿 No

Section D: Budget Details

* 25. Amount Requested (maximum \$2500)

* 26. Completed Budget Form (use template provided on CELT website). Include detailed justification and verified calculations. These answers have logic applied

Please upload your budget document here in one of the following formats: in one of the following formats: PDF, DOC, or DOCX (File size limit is 16MB).

Choose File

No file chosen

27. Other funding sources are **not** expected or required for this grant. However, to provide a full context for your dissemination plans, please indicate any other funding sources associated with your proposed project from the following list.

SSHRC

Other

TRU Internal Research Grant

BC Campus Teaching Fellowship

Choose File

EDC Grant Program

Please indicate total amount of other funding received. If you received a SSHRC grant, please also identify which grant and competition. If you indicated "other," please identify the funding source.