**MEDICAL FACULTY TRAVEL GRANTS**

**Preamble**

The Faculty of Medicine, University of Kelaniya pursues a policy of encouraging all academic staff to engage actively in research in medical education or in their chosen field of study. Academic staff are encouraged to submit their work for presentation at international meetings and conferences in order to ensure that their work is of good quality. The Faculty wishes to support its staff in this aspect by providing partial financial support towards registration fees and travel costs.

**Terms and conditions**

1. A maximum of 5% of the Faculty’s income from fee-paying MBBS students, earned during the previous calendar year, will be made available to extend financial support to academic staff who are able to provide documentary evidence showing that their work has been accepted for oral or poster presentation at a prestigious international meeting or conference, relevant to the field of study. Only one grant will be made in relation to a single presentation at a given meeting.
2. Selection of staff to be supported in this manner will be on a first-come, first-served basis, after public announcement of the total sum available for these travel grants at the January meeting of the Faculty Board each year.
3. Applications should be prepared using the form shown in Annex 1, and sent to the Dean through the Head of Department.
4. Applications will be tabled for approval at the meetings of the Management Committee of the Faculty of Medicine.
5. An individual staff member will be awarded **not more than Rs 200,000.00** on any one occasion.
6. Only academic and administrative staff of the permanent cadre will be eligible for these awards. Priority will be given to probationary lecturers and senior lecturers within 5 years of award of PhD or MD.
7. Each selected staff member will be given 80% of the value of the award on selection for the travel grant. The remaining 20% will be paid on submission of a short report and statement of accounts to the Dean, after attending the meeting / conference.
8. The report should be made according to the format shown in Annex 2.
9. The report should be submitted within 2 weeks of returning from the meeting.
10. Once an award has been made to an individual staff member, such an individual is not eligible for another award until at least two years have lapsed from the date of first award.

**ANNEX 1. FORMAT OF APPLICATION FOR MEDICAL FACULTY TRAVEL GRANT**

1. Name of academic staff member:……..……………………………………………………………………….

2. Department: ………………………………………………………

3. Title of meeting / conference to be attended:

 ………………………………………………………………………………………………………………………………..

4. Venue and dates of meeting:

 ……………………………………………………………………………………………………………………………………

5. Title of paper to be presented at meeting: (attach letter of acceptance)

 ……………………………………………………………………………………………………………………………………

 ……………………………………………………………………………………………………………………………………

6. Estimated expenses:

Airfare Rs ……………………….. US$ ……………………..

Registration fees Rs ……………………….. US$ ……………………..

Subsistence Rs ……………………….. US$ ……………………..

Incidental Rs ……………………….. US$ ……………………..

7. Total amount requested: Rs ………………………… US$ ……………………..

 1 US$ = Rs ………….. as on ……………….. (date)

8. Has the applicant previously received a travel grant from the University of Kelaniya?

 If so, state year of last award ..……………………; amount awarded: Rs ………………………..

I declare that the above information is true and correct.

………………………………………. ……………………

Signature of applicant Date

Observations of the Head of Department:

…………………………………….. ……………………

Signature of Head Date

**ANNEX 2. FORMAT OF REPORT ON MEDICAL FACULTY TRAVEL GRANT**

1. Name of academic staff member:……..……………………………………………………………………….

2. Department: ………………………………………………………

3. Title of meeting / conference attended:

 ………………………………………………………………………………………………………………………………..

4. Venue and dates of meeting:

 ……………………………………………………………………………………………………………………………………

5. Title of paper presented at meeting: (attach copy of abstract)

 ……………………………………………………………………………………………………………………………………

 ……………………………………………………………………………………………………………………………………

7. Total amount requested in Sri Lankan rupees: ………………………………………………………..

8. Summary of expenses incurred: (attach receipts)

Airfare Rs ………………………..

Registration fees Rs ………………………..

Local travel and subsistence Rs ………………………..

I declare that the above information is true and correct.

………………………………………. ……………………

Signature of applicant Date

Observations of the Head of Department:

…………………………………….. ……………………

Signature of Head Date