

ABN #: 65 820 412 570

STUDENT TRAVEL CLAIM FORM

Melbourne meeting 2017

Applicants for travel grants must either be members of the AuPS or must have applied for membership and present a poster or oral communication at the meeting. Please email this completed form to the AuPS Treasurer [treasurer@aups.org.au](mailto:treasurer@aups.org.au)

To be completed by the student and supervisor

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| --- | --- | --- | --- |
| STUDENT’S NAME | |  | |
| AuPS Student Member? | |  | |
| CITY | |  | |
| ACADEMIC ADDRESS | |  | |
| SUPERVISOR’S NAME | |  | |
| SUPERVISOR’S SIGNATURE | |  | |
| STUDENT’S SIGNATURE | |  | |
| BSB# |  | |
| ACCOUNT# |  | |