**Retooling and Retraining Internal Fund Application**

A ROLA application is not require for this funding.

To submit the application:

1. Either complete this application, sign it electronically, have your Chair sign it electronically, create a pdf, and email it to [socsci-researchofficers@uwo.ca](mailto:socsci-researchofficers@uwo.ca) **OR c**omplete this application, print it, sign it, have your Chair sign it, and bring it to the Dean’s Office (electronic submissions are preferred).
2. Ask your chair to send a confidential letter of support directly to the Dean’s Office, either electronically or in hard copy (electronic submissions are preferred).

If you have any questions, please direct them to [socsci-researchofficers@uwo.ca](mailto:socsci-researchofficers@uwo.ca).

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| **Part I** | | | | |
| Date: |  | Department: |  |
| Name: |  | E-mail: |  |
| Telephone: |  |  |  |
| Rank: | Full Professor  Associate Professor | | |

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| **Part 2:** | |
| Title of application: |
| Total amount requested (maximum of $2,500): |

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| **Part 3:** | |
| Did you apply to any internal funding program in the last 12 months? Yes No |
| If yes, were you successful? Yes No |
| Did you apply to any external funding program in the last 12 months? Yes No |
| If yes, were you successful? Yes No |
| Do you currently hold external research funds? Yes No  If so, are they related to this application? Yes No |

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| **Part 4:** | |
| Name of training activity: |  |
| Location of training: |  |
| Date of training: |  |
| Is this an International training activity? |  |

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| **Part 5: Justification & Budget** | | | |
| Please include a brief description of the training opportunity you will be attending and its impact on your research program. Attached as a separate page (Maximum 1 page; 11pt Times New Roman) justification for your application. Please ensure that you answer the following questions:  1. indicate the importance of this retooling and retraining activity to your research program  2. indicate any publications that you expect to follow your training  3. justify the budget expenses | | | |
| **Expense Type** | **DESCRIPTION** | **TOTAL** |
| **Please provide estimates for:**   1. **Registration costs** 2. **Travel to destination (e.g., air, train, auto)** 3. **Accommodation costs (e.g., hotel)** 4. **Estimates for daily meal allowance** 5. **Other expenses (e.g., Course materials)** | | |
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**Part 6: Letter of Support: Please ask your chair to submit a letter of support for your application directly to the Dean’s Office. Letters can be submitted electronically to** [socsci-researchofficers@uwo.ca](mailto:socsci-researchofficers@uwo.ca) **or in hardcopy at the front desk (SSC 9438).**

**Part 7: CV: Please attach your full CV at the end of this application.**

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| Signature of Applicant: |  | Signature of Departmental Chair |  |
| Date: |  | Date: |  |