

**UNIVERSITY OF DUBLIN**  
**School of Social Work & Social Policy**  
**POSTGRADUATE RESEARCH FUND 2018/2019**  
**GUIDELINES**

The School of Social Work & Social Policy has been allocated a small fund by the Trinity Foundation arising from the recent Alumni Appeal. This fund is being used to support **postgraduate (Taught & Research) student research**, for the following purposes only:

- 1) Participation in an academic meeting or conference relevant to the student's research;
- 2) Participation in a training course or workshop relevant to the student's research.

All applications to this fund must be supported by the student's supervisor. The fund can support 50% of research activity in either category (1) or (2) above, up to a maximum of €300.

Applications for reimbursements will only be processed within 6 months of the costs incurred. Eligibility to avail of the reimbursement becomes invalid after this time. Both informal inquiries regarding eligibility to apply for reimbursement and formal applications for reimbursement should be made to the Director of Teaching & Learning Postgraduate (DTLPG). Applications are reviewed by a sub-committee of the School's Postgraduate Teaching and Learning Committee. The student must submit proof of travel or conference registration fee or workshop fee. Students receiving funding to support their attendance at training events or workshops may be asked to give a short presentation to other students in the School.

**COMPLETED APPLICATION FORMS TO BE RETURNED TO:**

Noreen O'Sullivan  
School of Social Work and Social Policy  
noreen.osullivan@tcd.ie

**POSTGRADUATE RESEARCH FUND 2018/2019**

**PLEASE USE BLOCK CAPITALS.**

**NAME:**

**STUDENT NUMBER:**

**EMAIL:**

**RESEARCH DEGREE FOR WHICH REGISTERED:**

**SUPERVISOR:**

**PLEASE IDENTIFY THE RESEARCH ACTIVITY FOR WHICH SUPPORT IS BEING SOUGHT:**

1) Participation in an academic meeting or conference relevant to the student's research;

2) Participation in a training course or workshop relevant to the student's research.

**Please provide a short outline of the research activity for which support is being sought.**

Breakdown of costs incurred:

- TRAVEL
  
- ACCOMMODATION
  
- REGISTRATION FEE

HAVE YOU RECEIVED SUPPORT FROM THIS FUND BEFORE? Yes    No  
If yes please indicate when and how much was received:

SIGNATURE OF STUDENT:

SIGNATURE OF SUPERVISOR:

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Below completed by school

APPROVED

REJECTED

TOTAL PAID BY SCHOOL:

SIGNATURE OF DIRECTOR OF TEACHING & LEARNING POSTGRADUATE  
(DTLPG):

DATE: