

# Society for Renaissance Studies

Conference Officer  
School of Arts and Humanities  
Nottingham Trent University  
Nottingham NG11 8NS

CONFERENCE GRANTS

Tel: 0115-848-3020  
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*Confidential*

## Conference Grant Fund

*Office use only*

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**Closing date:** 31 January 2010

### 1. Applicant

Surname	
Forename	
Title (Dr, Professor, etc.)	
Date of birth	
Male <input type="checkbox"/>	Female <input type="checkbox"/>

Present position and academic affiliation

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### 2. Address for correspondence

Postcode:
Tel no:
Email:

Role in conference organization

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### 3. Conference details

Title of conference or colloquium

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Location

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Date

From:	To:
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Organizing body

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Is this conference part of a series or a one-off meeting?

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### 4. Participation

How many scholars are expected to attend?

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How many papers will be given?

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How international will the participation be?

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Is attendance by invitation, or is the meeting open to all?

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## 5. Grant requested

Please state the sum requested **to the nearest full pound**

£

## 6. Conference programme, listing participants

Please list the speakers it is proposed to invite, as known at the time of the application, giving their title (Dr, Professor etc.), name, present appointment, title of paper, and proposed length of stay. Please **asterisk** or otherwise indicate the names of those for whom support is sought in this application, adding, if appropriate, a brief justification of the reason for applying for support for those indicated.

## 7. Summary of conference

Please summarize the aims and objectives of the conference or colloquium and give any further details about the meeting and its importance.

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## 8. Conference budget

### (a) Expenditure

<i>Item</i>	<i>Amount</i>
Speakers	
Catering/accommodation (per delegate, per day)	
Room/equipment hire	
Administration costs, including secretarial/temporary staff (please specify)	
Printing and publicity (including conference packs)	

<b>Student bursaries</b> (value per bursary/number to be offered)	
<b>Other</b> (please specify)	
<b>Total expenditure</b>	£

**(b) Income**

<i>Item</i>	<i>Amount</i>
<b>Conference fees</b>	
Full delegate fee    £ <input type="text"/> No. of delegates at full fee (projected) <input type="text"/>	
Total income from full delegate fees	£
Reduced fee    £ <input type="text"/> No. of delegates at reduced fee (projected) <input type="text"/>	
Total income from reduced delegate fees	£
<b>Grants from other sources</b> (please give totals for each grant here, and itemize in Section 10)	
<b>Other</b>	
<b>Total income</b>	£

**9. Details of grant requested from the SRS**

Please itemize costs

<i>Item</i>	<i>Total Amount</i>
<b>Speakers' travel</b> (please give name of speaker, town/city of departure, and fare)	
<b>Speakers' accommodation</b> (please give name of speaker, no. of nights at conference, and cost per night)	
<b>Speakers' maintenance</b> (please give name of speaker, no. of days at conference, and cost per day)	

Administrative expenses (please give full details and justification)	
Total grant requested	£

**10. Other applications**

Please give details of applications to other bodies for financial support. Please state the outcome where known and indicate the purpose for which any grants would be used.

Fund/organization	Amount requested	Purpose of grant	Result (or date expected)

**11. Publication plans**

Please give details of the plans for publishing, in any form, the papers presented at the conference.

**12. Referee**

Please note that your referee should be drawn from *outside* your own institution.

Name:  
 Post/Dept:  
 Institution:

**Important note:** Results will be issued approximately **two months after the closing date**.

I confirm the information provided in connection with this proposal is complete and accurate, and I accept all terms, conditions and notices contained in the Notes for Applicants.

**13. Signature and date**

Applicant's signature  


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 Date:

Institutional authorization (if required; see note §13)  
 Signature  


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 Name  
 (please print)  


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 Position  
 (please print)  


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 Date:

**Please send the completed form to:** Professor Claire Jowitt, Conference Officer, Society for Renaissance Studies, School of Arts and Humanities, Nottingham Trent University, Nottingham NG11 8NS.  
 Emailed applications should be sent to: [claire.jowitt@ntu.ac.uk](mailto:claire.jowitt@ntu.ac.uk)