



THE UNIVERSITY  
OF BRITISH COLUMBIA

Edwin S.H. Leong  
Healthy Aging Program  
Faculty of Medicine

Updated: 10/17/2022

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**Edwin S.H. Leong Healthy Aging Program  
Trainee Travel Stipend Application Form**

**First and Last name(s) of applicant:**

**Current position at UBC:**

**Department and Faculty:**

**Supervisor(s):**

**Name of Conference attending:**

**Date of Conference:**

**Location of Conference:**

**Role in Conference (e.g. oral or poster presentation):**

**Use of Fund:** Please provide a brief description of how much funding is being requested (up to \$500) and the expenses for which reimbursement is being sought

**Research Project:** Please provide a brief description (150 words max) of the project being presented, including the objectives, main findings/implications, and applicant's role in the project.