

2025 ORT CONFERENCE PARTICIPATION AWARDS PROGRAM

Description

The Office of Research Trainees (ORT) is committed to supporting research trainees and postdoctoral researchers at the University Health Network (UHN). To this end, the ORT is pleased to offer a limited number of Conference Participation Awards to enable graduate students and postdoctoral researchers to participate in national and international conferences and share their research in oral and/or poster presentations. The objective of the ORT Conference Participation Awards is to advance research, enable knowledge translation, and contribute to the career development of UHN research graduate students and postdoctoral researchers.

Funds Available

The value of individual awards will be **up to \$500** to be used for conference participation.

Deadlines

Meetings and conferences occur throughout the year. To have awards adjudicated in advance, there will be three application deadlines:

- March 7, 2025 for conference participation between May – Aug 2025 (inclusive)
- July 4, 2025 for conference participation between Sep – Dec 2025 (inclusive)
- **November 14, 2025 for conference participation between Jan - Apr 2026 (inclusive)**

Eligibility and Application Process

1. Applicants must be a UHN graduate student or postdoctoral researcher (with a PhD) when applying and attending the conference they are requesting funding for.
2. The applicant's supervisor must have a primary appointment with a UHN Research Institute, including Scientist, Senior Scientist, Clinician Investigator, Clinician Scientist, and Education Investigator (excluding Affiliate Scientists). Primary appointment information can be found [here](#).
3. Applicants must have at least 75% protected time dedicated to research.
4. Applicants must be registered with the ORT at the time of application. Registration can be completed [here](#). If you are unsure of your registration status, please email ortadmin@uhn.ca.
5. Applicants who hold scholarships or fellowships that include a research allowance, which can be used for travel (e.g., CIHR), are NOT eligible.
6. Applications that meet all the requirements will be entered into the lottery. The number of award recipients per UHN Institute will be relative to the number of trainees and postdocs at each Institute.
7. Successful applications will be notified *prior* to the conference. Instructions will be sent to the award recipient regarding the procedure used by ORT to reimburse the lab's Functional Cost Centre. It is the award recipient's responsibility to submit all documentation for reimbursement by the submission deadline outlined in the award letter.
8. The award recipient must be the first author and presenter of the oral and/or poster presentation.
9. Successful awardees will be expected to acknowledge receipt of an ORT Conference Participation Award in their conference presentation.
10. Awardees will also present conference reports to their lab, inviting other UHN trainees, postdoctoral researchers, or PIs who may wish to learn from their experience.

11. Graduate students and postdoctoral researchers are eligible to win 1 ORT Conference Participation award per year. Supervisors can nominate a maximum of 2 graduate students or postdoctoral researchers per competition.

Allowable Costs

Expenses eligible for support through the ORT Conference Participation Awards program include:

1. Participant's travel and accommodation (all travel will be by the lowest economy fare). *Travel outside of Toronto is subject to UHN Travel Policies*
2. Conference registration fees
3. Printing costs (i.e., posters)

The ORT encourages graduate students and postdoctoral researchers to consult with their supervisors in advance to discuss lab policies surrounding allowable conference expenses and the use of awards to offset costs.

Application Submission > Follow [this link](#) to access the online application form.

- You will be asked to provide information about yourself and the conference you are requesting funding for.
- You will also be asked to upload a completed and signed copy of the "Supervisor Attestation" form below. Please submit the file as a PDF or Word document and name the file using the following format:
Firstname_Lastname_ORTConferenceAward
- If you have any questions while completing the application, please email ortadmin@uhn.ca

NOTE: ORT financial contributions for this initiative are subject to the availability of funds. Should ORT funding levels be deemed insufficient due to unforeseen circumstances, ORT reserves the right to reduce, defer, or suspend financial contributions to awards received. Funding for this program is limited and only a fixed number of awards will be given. It is anticipated that demand will exceed the available funding. Successful applicants are to inform the ORT if they are no longer attending the conference for which they received this award, in which case, the award will be withdrawn. These applicants are eligible to apply in future competitions.

SUPERVISOR ATTESTATION FORM

Instructions:

- 1) Please have your supervisor answer the questions in the boxes below.
- 2) This form should be signed and dated by you and your supervisor.
- 3) Upload a copy of this form to your online application using the naming convention Firstname_Lastname_ORTConferenceAward.

Applicant and Conference Information:

- Full Name of Applicant: _____
- Conference Being Applied For: _____
- Conference Dates (mm/dd/yy): From: _____ To: _____

Supervisor Attestation:

- Name of Supervisor: _____
- Title (i.e. Scientist, Clinical Investigator, etc.): _____
- I confirm that the nominated student or postdoctoral researcher has at least 75% protected research time at a UHN Research Institute.
☐ Yes ☐ No
- I confirm that I haven't nominated more than **two (2)** students or postdoctoral researchers for this award competition.
☐ Yes ☐ No
- How do you feel this conference will benefit the applicant's training? Please explain in 2-3 sentences.

Enter your response here:

We affirm that the provided information and submitted materials are true and accurate representations to the best of our understanding.

Signature of Applicant: _____ Date: _____

Signature Supervisor: _____ Date: _____