

## ArcticNet Training Fund Reference Form (To be filled out by supervisor/sponsor)

Please use Times New Roman (11 points) and do not exceed the allocated space in each cell.

<b>1. Name, title &amp; affiliation of applicant:</b>
<b>2. Name, title, affiliation and e-mail of supervisor/sponsor:</b>
<b>3. Name, location and dates of training opportunity:</b>
<b>4. Please state the relevance of the proposed "school/program" for ArcticNet and for the applicants training:</b>

**Note:** The ArcticNet Training Fund will cover 75% of the participation costs of the applicant up to a maximum of \$5K. The remaining 25% should be covered by the applicants' supervisor/sponsor or with other funds available to the applicant for the training activity.

\_\_\_\_\_  
Supervisor/sponsor signature

\_\_\_\_\_  
Date

Please return the completed form (by email, fax or mail) to [Natalie Desmarais](#) at the ArcticNet Administration Centre.