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INQUA GRANT RELEASE PROCEDURES

In order to activate the release of funds for your funded activity, you need to complete the form below. Please only claim funds that you will spend during the year the grant is allocated. If, due to unforeseen circumstances, you will be able not spend the monies allocated to you in this time, you may request a carry-over of the funds for use during following year. To do this you must provide an explanation for not spending the allocated money and a motivation for the carry-over of the grant in your annual report for the activity. Carry-over is not automatic and has to be approved by the Executive.

After completing and signing the form please submit one copy to the INQUA Treasurer, (see website for contact details) and one copy to the President of the INQUA Commission sponsoring your activity. The INQUA Treasurer will release funds at any time before September 1st of the funding year, but be aware of delays inherent in the international transfer of funds.

Please note that:

* INQUA grants may be paid to institutional or non-institutional accounts. Where they are to be paid into non-institutional accounts, it is activity leaders’ responsibility to make sure that their institutions allow this, and that all formalities and legalities are observed.
* Funds can only be transferred between full-service banks (i.e. wire transfers to credit unions will not be possible).
* Grants are normally paid to the activity leader but, at the activity leader's request, may be paid to a co-leader or local conference organizer.
* Because **INQUA** requires that its support be prioritised to assist developing country and early career scientists to participate in international activities organized by the activity leader, it **does not allow overheads to be charged on its grants**. INQUA hopes that activity leaders’ institutions will be happy to join INQUA in promoting science by waiving any overheads normally charged.
* INQUA requires that you submit electronic copies of receipts for expenditure with your annual reports. We also **require that the original receipts** (incl. boarding passes in the case of electronic tickets) **be submitted** to provide an auditable record of INQUA support.

INQUA GRANT RELEASE FORM

1. Year of grant award
2. Award grant number
3. IFG/Project/Skills grant title
4. Leader(s) (name, mailing address, e-mail address): (All communications will take place by email).

|  |  |  |
| --- | --- | --- |
| Name | Mailing address | Email address |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Financial details** (For countries using IBAN, SWIFT and BIC codes).

|  |  |
| --- | --- |
| **Name of account holder (not necessarily PI)** |  |
| **Home address of account holder (not bank address)** |  |
| **Bank name**  |  |
| **Bank address** |  |
| **IBAN** |  |
| **SWIFT or BIC code** |  |
| **Email address of account holder** |  |

**NOTE – If from a country not using IBAN, SWIFT or BIC codes**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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|  |  |
| --- | --- |
| **Name of account holder (not necessarily PI)** |  |
| **Home address of account holder (not bank address)** |  |
| **Bank name** |  |
| **Bank address** |  |
| **Sort or routing codes (not IBAN)** |  |
| **Account number** |  |
| **Email address of account holder** |  |

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1. **Your deadline for money transfer**

# I hereby request release of the funds allocated to the above activity for this year, and confirm that the activity leader(s)

# will supply a report by the 31st of January of the year following the grant allocation, which will include a budget report specifying how the INQUA funds were used to support this activity’s activities during the year;

# accept(s) any conditions attached to the allocation, as set out in the award letter received from the INQUA Vice-President responsible for the Commission, and;

# will appropriately acknowledge INQUA sponsorship and support in the activity's activities and publicity material.

# (*Please* *INSERT name of relevant INQUA Commission*).

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (*Activity leader)* **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**