**The Brockington Visitorship and**

**The Chancellor Dunning Trust Visitorship**

**Public Lecture Nomination Form**

A completed nomination form is essential for consideration by the Provost’s Advisory Committee for the Promotion of the Arts. You may vary the length of the sections, but the content is limited to **five pages.** You may include up to 10 pages of supporting documentation, such as curriculum vitae, letters of support, abstracts of previous keynote addresses etc.

**Please submit one electronic copy of your nomination to** [**pacpa.provost@queensu.ca**](mailto:pacpa.provost@queensu.ca).

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| **Section 1** | |
| **Name in full of nominee:** |  |
| **Permanent address:** |  |
| **Education, honours received etc.** *(degree or honour, institution, date)*: |  |
| **Career summary** *(titles, organizations, dates)*: |  |
| **Key publications:** |  |
| **Previous keynote addresses** *(provide abstract or example if available)*: |  |

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| **Section 2** | |
| **Proposed date of visit:** |  |
| **Is the proposed date of visit affiliated with any other special event** *(yes or no)*? |  |
| **If yes, please elaborate:** |  |
| **Is this event associated with a larger project that may be supported by a separate Brockington, Dunning, Sutherland and/or George Taylor Richardson grant** *(yes or no)*?**.** |  |
| **If yes, please elaborate:** |  |
| **Are you applying for a Brockington Visitorship or Chancellor Dunning Trust Visitorship?** |  |
| **Topic of public lecture:** | |
| *(Please explain clearly how and why the topic of the public lecture will be broad enough to attract and be of interest to a wide audience from the Queen’s campus and the Kingston community. If applying for a Chancellor Dunning Trust Visitorship, please ensure that the topic of the visit clearly states the connection to the purpose of the Dunning Trust namely; “to promote understanding and appreciation of the supreme importance of the dignity, freedom and responsibility of the individual person in human society”. If applying for a Brockington Visitorship, please ensure the Visitor is a person of distinction.* | |
| **Other activities:** | |
| *(Speakers are expected to meet with segments of the Queen’s and Kingston communities. Please provide a tentative listing of proposed events.)*  Please indicate your efforts to ensure events are accessible to people with disabilities. In considering this, please refer to the Equity Office’s Accessible Event Planning document located at: [http://queensu.ca/accessibility/how-info/accessible-event-planning](https://www.queensu.ca/accessibility/how-info/accessible-eventmeeting-planning) | |

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| **Section 3** *(Please refer to the Guidelines for the Brockington and Dunning.)* |
| **Reasons for recommending person:** |
| *(Please include details showing the suitability of the theme and breadth of appeal. Please also address the impact the speaker will have on enriching the learning environment for students, academic unit(s) and the university and greater Kingston communities.)* |

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| **Section 4** *(Please provide details and/or documentation justifying the budget amounts listed below.)* | |
| **Budget information:** | |
| **Speaker fees** *(please note that speaker’s fees are subject to income tax and Canadian residents will receive a T4A form at the end of the calendar year - if you wish to cover the tax for Non-Residents please add 15%)*: |  |
| **Travel costs:** |  |
| **Hotel/accommodation:** |  |
| **Hosting expenses** *(if applicable, please list additional costs associated with hosting a visiting scholar with disabilities)*: |  |
| **Other** *(if applicable, please list additional costs associated with making the event accessible to attendees with disabilities)*: |  |
| **Total grant requested:** |  |
| **Chartfield funds are to be deposited to** *(internal departments)*: |  |
| **Have you applied for funding or support from other sources** *(either internal or external including cost and support to meet accessibility needs)*? |  |
| **Please state what your nominees’ speaker fees would normally be for participating in a similar event:** |  |
| **Department ID and financial contact for your unit/department:** |  |

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| **Section 5** | |
| **Nominator(s)** *(name, address, email, telephone)*: |  |