**Application form for ISCEV Travel Grant Applications**

**Section 1: contact details**

Family name:

Given name:

Degree(s):

Position:

Institution:

ISCEV Region (The Americas; Europe and Africa; Asia and Oceania):

Postal address:

Email address:

**Section 2: declaration**

Please note that submission of this application will be taken as confirmation that the statements below are true for you:

1. *Without this travel grant, I would be unable to attend the ISCEV International Symposium or course*
2. *I have not previously received a travel grant from ISCEV*
3. *I am submitting the sole travel grant application from my lab/organisation*
4. *I have less than 5 years of experience in clinical electrophysiology*

**Section 3: type of application (delete where applicable)**

I am applying for a travel grant for:

1. *Symposium only\**
2. *Course only – human*

*Course only - animal*

1. *Symposium and course\**

*\*Applicants must submit an abstract using the online abstract submission process AND include their abstract with this application.*

**Section 4: financial need**

Please briefly describe why you need financial assistance and also describe what efforts have been made or are planned to find other funding:

**Section 5: electrophysiology experience**

Please provide a brief description of your experience in clinical electrophysiology of vision:

**Section 6: expectations**

Please briefly describe what you hope to achieve by attending the Symposium and/or course (delete as applicable).

**Section 7: letter of support**

If you are a junior member of ISCEV, or would qualify for junior membership, please append an additional letter of support from your supervisor. Junior is defined as “Primarily engaged in supervised basic science or clinical training, e.g. a graduate student, post-doctoral fellow, resident or clinical fellow”.

**Section 8: abstract** (N.B only for applicants for Symposium only, or Symposium and course)

Please provide your abstract here : (or attach to e-mail)

When complete, please e-mail this completed form and your letter of support to karen.holopigian@novartis.com. The closing date for applications is detailed on the website.

Late or incomplete applications cannot be considered.