**The XVI ECSMGE Registration Fee Waiver Scheme**

**APPLICATION FORM**

The Conference Organising Committee of the XVI ECSMGE is offering **Registration Fee Waivers** to up to 10 applicants. The Conference Organisation Committee will **not** provide any contribution to travel or accommodation costs for attending the conference. Applicants may wish to consider applying to the ISSMGE Foundation for support with these costs (<http://www.issmge.org/en/issmge-foundation>).

Applicants should first read the Information for Applicants.

The following application form should be completed in full and emailed to Professor David Toll at [d.g.toll@durham.ac.uk](mailto:d.g.toll@durham.ac.uk) before Friday 1 May 2015. A scan of pages with signatures is required.

**Section 1: Your details**

|  |  |  |
| --- | --- | --- |
| Name of applicant: | First name: | Surname or family name |
| Age: | Contact telephone number: | Contact email address: |
| Nationality: | Country of residence: | ISSMGE Member Society: |
| Occupation: | Organisation: | Position: |

**Section 2: Event details**

|  |
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| Details of your contribution at the event and statement of how this will contribute to your professional career:  (500 word limit) |
| Statement on why you should receive a Registration Fee waiver from the XVI ECSMGE:  (200 word limit) |

**Section 3: Sources of funding for travel and accommodation**

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| --- |
| Please provide details of sources of funding applied for to support travel and accommodation costs (examples might include host educational institution, employer, ISSMGE Member Society, ISSMGE Foundation, alumni organisations, other Trusts or Foundations) |
| Please provide details of other sources of funding obtained: |

**Section 4: Declaration**

If my application for a Registration Fee Waiver is successful:

* I agree that I will inform the Conference Organising Committee **as soon as possible and** **at least 1 month before the event** if I am unable to attend the conference for whatever reason, so the award can be reallocated to another candidate.
* I agree to provide a report of approximately 500 words including images (maximum 2) for inclusion in the ISSMGE Bulletin for publicity purposes. This report will be delivered within 6 weeks of the conference.
* I agree to acknowledge my successful award in presentations/poster given at the ECSMGE.

Name:

Signature

Date:

**Section 5: Statement of support**

Please ask your research supervisor or employer or President of your ISSMGE Member Society to complete the following section:

|  |  |
| --- | --- |
| Your name: |  |
| Your organisation: |  |
| Your position: |  |
| Your relationship to the applicant: |  |
| Your contact details (telephone and email |  |
| Please provide a statement of support outlining the value to your organisation of the applicant attending the XVI ECSMGE:  (300 word limit) | |
| Has the applicant applied for funding for travel and accommodation? Please provide details. | |
| Is your organisation able to provide financial assistance for travel and accommodation? Please provide details. | |
| The XVI ECSMGE Organising Committee will **not** provide any contribution to travel or accommodation costs for attending the conference. Please indicate how these costs will be covered. | |
| Signature and date |  |