**The 18th Awaji International Conference on Infection and Immunity**

**Application Form for Travel Bursary**

**(Travel Bursary for Foreign Scientists)**

**Curriculum Vitae**

|  |  |  |
| --- | --- | --- |
| Name | / / / /  first name middle name last name | |
| Affiliation |  | |
| Position | Master Student / PhD student / Postdoc / Teaching staff  / Others ( ) (Select most appropriate one) | |
| E-mail |  | |
| Country You Live In |  | |
| VISA  (to enter Japan) | Necessary / Not necessary  http://www.mofa.go.jp/j\_info/visit/visa/index.html | |
| Address |  | |
| Phone Number |  | |
| Date of Birth | / / (Age: )  year month date | |
| Gender | Male / Female | |
| Recommender\* | Name |  |
| Position |  |
| Affiliation |  |
| E-mail |  |
| Relationship with the applicant |  |
| Education |  | |
| Work Experience |  | |
| Publications | 1. Original Research and Review Articles (peer-reviewed only; name of  author(s), title, name of journal, volume, page number, year)  2. Conference presentations (name of presenter and co-presenter,  presentation title, name of conference, venue, year, name of journal  in which the abstract was published, volume, page number, year)  3. Awards and Honors  4. Others (Patent, etc) | |

\* Recommendation letter must be sent directly by the academic supervisor or the department head to the AIFII 18 Secretariat via e-mail (aifii2019@aeplan.co.jp, Free format) by June/14/2019.

**Presentation**

|  |  |
| --- | --- |
| Applicant Name | / / /  first name middle name last name |
| Categories | Viral Infections / Parasitic Infections / Bacterial Infections  / Host Defense and Immunity / Arthropod Vector (Select most appropriate one) |
| Title of the presentation  (30 words) |  |
| Name of all authors |  |
| Affiliations of all authors |  |
| Abstract  (250 words) |  |
| Impact of the presentation  (300 words) |  |
| Personal motivation to apply this travel bursary  (300 words) |  |

The size of the letter should be more than 10.