



**APPLICATION FOR A TRAVEL GRANT**

**Please read the BSMM Travel Grant Award Criteria before completing this application. Applications should be submitted by e-mail to the Hon. Secretary at [susan.howell@kcl.ac.uk](mailto:susan.howell@kcl.ac.uk)**

**Travel Grant application deadlines may be found on the BSMM website [www.bsmm.org](http://www.bsmm.org). Applications will be processed within three weeks of the Travel Grant deadline that follows receipt of a completed Travel Grant application.**

Date of next BSMM Travel Grant application deadline:

Details of Applicant:

Title:
First name(s):
Surname (block letters):
E-mail address:
Postal address:
Telephone:
Mobile phone:

What meeting do you wish to attend? Please give the title, location and inclusive dates:

Why do you wish to attend this meeting? (e.g. to give an oral paper or present a poster)?

Please give the title of your paper or poster if applicable (a copy of the abstract must be submitted with this application):

Are you an invited participant? (if so, a copy of the official letter of invitation must be submitted with this application):

Have you applied for financial support from another source for this meeting? Please give details of other assured sources of assistance, other applications that have been made and when the results of these other applications will be known:

Have you received a previous Travel Grant from the BSMM? If so, please give the start date of the most recent activity that you attended which was funded (in full or part) by a BSMM Travel Grant, and the value of the Travel Grant:

When did you join the BSMM?

What is your current involvement in the field of mycology?

Please give details of your recent presentations to meetings of the BSMM or any other contributions to its activities:

Please give full details of your proposed travel costs (indicate class of air and rail fares and distinguish between domestic and international flights):

Registration fee (documentary evidence of registration fee must be submitted with this application):

Total amount applied for:	
<b>Registration:</b>	£
<b>Travel:</b>	£
<b>Total amount applied for</b>	£

I wish to apply for a British Society for Medical Mycology Travel Grant. I have read and agree to abide by the conditions governing its award.

Signature of applicant (not required if submitted by e-mail):	Date:

Please return the completed application to the BSMM Hon. Secretary by e-mail at [susan.howell@kcl.ac.uk](mailto:susan.howell@kcl.ac.uk) along with accompanying documentation. If it is not possible to submit the application and/or documentation by e-mail it may be printed out and sent to the BSMM Secretary at the address below:

Dr Susan Howell,  
 BSMM Hon. Secretary  
 Mycology  
 St John's Institute of Dermatology  
 St Thomas' Hospital  
 London  
 SE1 7EH  
 UK