



Scholarship Application Form - ICPE 2010

26th International Conference on Pharmacoepidemiology &
Therapeutic Risk Management
August 19-22, 2010
Hilton Brighton Metropole
Brighton, United Kingdom

DEADLINE:

Applications must be received at the ISPE Office by 5:00pm (EST/USA), March 15, 2010.
The applicant is responsible for confirming that the ISPE Office received the application.

- A limited number of scholarships (expense reimbursement) may be available to assist with attendance at ICPE 2010 Scholarships may be used for registration, lodging, and travel to the conference. Applicants are advised that typically the total amount of financial (scholarship) assistance requested to attend the ISPE annual meeting significantly exceeds the amount of funds the Society allocates. Applicants are strongly encouraged to try to find additional funding to attend this meeting from other sources.
- Researchers from developing countries, those in genuine financial need, and students who otherwise would be unable to attend ICPE are invited to submit an application form.
- The Scholarship Committee bases its decisions on factors including, but not limited to, having an accepted abstract, country of residence, student status, financial situation, whether applicant has received an ISPE scholarship previously, stated reasons for wishing to attend meeting, and supporting statements.
- All applicants should receive notification of decision in May. ISPE will reimburse recipients in US dollars for approved expenses on receipt of appropriate documentation after the ICPE.
- Full Time Student: NO YES.
 If yes, additional information must be supplied. (See Notes section)*
- Have you ever received an ISPE scholarship to attend an annual ICPE meeting?

 NO YES. If yes, when _____

Applicant Information

PRINT PLEASE

Email _____

Given/First Name _____ MI ____ Family/Last Name _____

Title: _____

Organization/Institution _____

Mailing Address _____

City _____ State/Province _____

Country _____ Postal Code _____

Office Telephone _____ FAX _____

Support requested (Check all that apply/US Dollar amounts please)

A. Registration

- Conference Registration
- Advanced Topics in Pharmacoepidemiology
- Introduction to Risk Management

B. Travel

[e.g., airline, train, mileage]

Provide estimate of travel expenses

C. Housing/Lodging

Number of nights: _____

Expected Date of Arrival: _____

Date of Departure: _____

Provide estimate of housing lodging expenses

Total Estimated Amount of Travel and Housing/Lodging Funds Requested (US Dollars)

B. Travel \$ _____ PLUS C. Housing/Lodging \$ _____

Total (B+C) \$ _____

Meeting Related Information

1. Did you submit an abstract for presentation at the 2010 Annual Meeting NO YES

2. Abstract Title:

3. Please provide a brief explanation of your reason for requesting a scholarship. (Use additional space as needed)

NOTES:

1. ***STUDENTS** - This form must be accompanied by a letter of reference from one of the following: Your Dean, Department Chair, Advisor, or Supervisor attesting to your involvement in the field of pharmacoepidemiology and your need for financial support. Also, students must include documentation of full-time student status (e.g., a clear copy of student ID with a valid date or letter from school or program) at the time of registration.
2. If you are requesting travel funding, please check with your travel agent or local airline to find the lowest cost to purchase your own ticket. Enter the amount on the travel amount line.
3. The level and nature of awards for scholarships/expense reimbursement will be determined on an individual basis. If travel and hotel expenses are awarded, arrangements must be coordinated with the ISPE office. ISPE pays lowest available transportation and housing costs. No payments will be made until the ISPE office receives all expense receipts – and after the ICPE.
4. Scholarships do not cover food, ground transportation, parking, incidentals, etc.
5. Cancellation: If you will be unable to attend the conference, please let the ISPE Office know as soon as possible by phone (+1 301-718-6500) or email (ispe@paimgmt.com).
6. **Deadline: March 15, 2010.** Forms must be received at the ISPE office by 5:00pm EST/USA. **The applicant is responsible for confirming that the ISPE Office received the application.**
7. Notification: May 2010
8. Information about travel VISA requirements for the UK can be found at <http://www.homeoffice.gov.uk/passports-and-immigration/>
9. When requested, ISPE will issue a letter of invitation to support a travel visa application upon registration to attend the ICPE 2010 and verification of payment. **Recipients of scholarship assistance will need to submit a special registration form.**

Return the completed forms to ISPE by:

1) **Mail to:** *International Society for Pharmacoepidemiology,
Attention: - 2010 Scholarship
5272 River Road, Suite 630,
Bethesda, MD 20816
USA*

OR

2) **FAX:** +1 301-656-0989.

OR

3) **ISPE email:** ispe@paimgmt.com
In the subject line enter “2010 Scholarship Application”.