

**Grant Application Form**

Address to submit the grant application: info@grell-network.org

**Section 1 - Personal details of Applicant**

|  |  |
| --- | --- |
| Family/surname: |  |
| Given names: |  |
| Date of birth: |  |
| Nationality: |  |
| Present position: |  |
| Organisation: |  |
| Since when (year): |  |
| Telephone num° : |  |
| @mail : |  |

**Section 2 - Professional qualifications and experience**

Please attach a list of your publications in the last five years, as well as relevant older publications

Please attach your curriculum vitae.

**Section 3 - Type of grant**

Application for:

|  |  |  |  |
| --- | --- | --- | --- |
| And | Attending the GRELL annual meeting and satellite workshop(s) |  | NB: please attach the abstract you submitted |
| Or | Visiting a South European Cancer Registry |  | NB: please attach:  1. a letter from the Director of the Cancer Registry that will host you  2. a short description of the aims of your visit at the Registry |

**Section 4 – Previous international experience**

Please list your previous international professional trips/visits during the last 5 years (funding organization, hosting organization, year, length, etc.)

**Section 5 - Cost estimates**

*Enter realistic cost estimates for travel and living costs (accommodation, food, etc.). :Please note that the GRELL fellowship is a contribution towards these costs (= will not cover the total amount requested).*

|  |  |  |
| --- | --- | --- |
| Return travel: Euros : | Stipend per day: Euros : (accommodation and food) | Total |

Please indicate where you plan to apply or have applied for other funding: Y N

Applicant signature: Date: