## APPLICATION FORM CIC2024 Vaccinology Student/Trainee Research Program (VSRP)



who have received it in the past may st	who have not received the bursary in the past will be given priority. Applicants ill apply if they are in a different training program to the one they were in when resary recipients must participate in all 3 days of the conference and attend all
Applicant is applying to:	
SRP - Travel Bursary and participation in the VSRP	
VSRP - Program only	
Please see <u>full eligibility for funding</u> .	
Have you received the VSRP travel burs	ary before?
Yes, year of bursary received:	
☐ No	
Applicants must submit the same abstract that is submitted to CIC, please attach the abstract you submit to CIC along with this application form.	
Applicant name:	
Institution/University name and city:	
Applicant's email:	
<b>Applicant currently enrolled in (check most appropriate)</b> *Applications must be enrolled in Masters or higher-level program.	
Graduate level: Masters PhD Medical Student	
Post Graduate Level: Medical Residency Fellowship Post-Doctoral Other (specify):	
Project title:	
Describe how your project is relevant to <u>CAIRE's objectives</u> (maximum 200 words):	





	nclude your role in the protocol development, funding, ethics, participant halysis, sample testing, report writing, and if applicable, manuscript (maximum 150
Project supervisor's name:	
Project supervisor's signature:	
Project supervisor's email:	
	s you acknowledge that students receiving the travel bursary must participate in the the activities of the student program):

COMPLETED APPLICATIONS ARE TO BE EMAILED BY MAY 23, 2024 11:59pm PDT TO CAIRE@BCCHR.CA.