



2016 IFBLS Student Award

PURPOSE

To enable a student with restricted financial resources, to attend the IFBLS World Congress and Student Forum.

To promote the objectives of IFBLS by encouraging student participation in IFBLS activities.

ELIGIBILITY

The applicant must be enrolled in a recognized school of biomedical laboratory science and be a student member of an IFBLS Associate member in good standing

APPLICATION

The applicant must complete the application form and send it along with a letter of recommendation from a representative of their school, and the President of their National Association.

EVALUATION

The IFBLS Awards committee will be responsible for the selection of the award recipient.

DEADLINE

Applications must be post marked or sent electronically to the IFBLS Office by **April 1, 2016.**

PRIZE

The prize consists of US \$1500.00 and is intended to facilitate attendance at and participation in the IFBLS World Congress

The prize will be presented during the Awards Ceremony as part of the Congress Opening Ceremony.

CONDITIONS

Award recipients (associations) are responsible for booking travel, sickness and accident insurance, cancellation insurance and accommodation well in advance of the Congress dates to obtain the best prices. The IFBLS office can assist with obtaining travel documents.

The IFBLS, Award Sponsors and the Congress host are not responsible for any loss or injury to the recipient arising out of his/her attendance at the World Congress and GAD. Expenses incurred over and above the value of the award are the responsibility of the award recipient.

A copy of the travel itinerary and hotel confirmation must be submitted to the IFBLS office by **August 1, 2016** or the award will be forfeited.

IFBLS STUDENT AWARD
APPLICATION FORM

Applications must arrive at the IFBLS office no later than June 1, 2014.

International Federation of Biomedical Laboratory Science

33 Wellington Street North,

Hamilton, ON L8R 1M7 Canada,

E-mail: communications@ifbls.org

Applicant's Name (First):	
(Last):	Gender: M/F
Address:	
Country:	Telephone:
E-mail address(es):	
Name of Applicant's school:	
Address:	
Country:	
Name of Student's National Association:	
Address:	
Country:	Website:
Reasons for applying for Award: (use additional page if more space is required)	

Date: _____

Signature of School Representative: _____

Position: _____

(For IFBLS office use only)

Date application Received by Office: _____

Application: Accepted _____ **Rejected** _____