

NPF Fellow Symposium
NATIONAL PANCREAS FOUNDATION TRAVEL SCHOLARSHIP
April 27-29 2012 Atlanta, GA

To be filled out by applicant

Personal Information:

Name in Full: _____
Gender: Male Female
Home Phone: _____
Email address: _____ Alternative email: _____
Home Address: _____

Have you attended a previous NPF Fellows Symposium Yes No
If yes what year(s): _____

Professional Information:

Office Address: _____

Office Telephone: _____ Office Fax _____

Education:

College/University
Attended with Dates: _____

Medical School
Attended with Dates: _____

Graduate School
Attended with Dates and Specific Degree _____

Postgraduate Training:

	<u>Type</u>	<u>Institution</u>	<u>Dates</u>
Internship:	_____	_____	_____
Residency:	_____	_____	_____
Fellowship:	_____	_____	_____
Other:	_____	_____	_____

Present Professional
Position & Institution: _____

Reference from Mentor (required to attend conference)*:

Mentor/Advisor Name: _____

Address: _____

Telephone Number: _____ E-mail Address: _____

Reason for Attending Conference:

What is your interest in pancreatic disease? _____

What are your career goals and aspirations? _____

If you have attended the symposium previously please provide a brief description of your work since your last attended. _____

Other:

Are you willing to share a room? YES NO

I certify that the information I have provided on this application is true and accurate to the best of my knowledge.

Signature of Applicant: _____ Date: _____

Please make sure that your application materials include all of the following items before e-mailing:

___ Completed application form

___ Copy of Curriculum Vitae (CV)

___ Letter of recommendation from mentor/advisor*

**Please note your mentor/advisor should email the recommendation directly to The National Pancreas Foundation.*

Email materials postmarked no later than **February 10, 2012** to **info@pancreasfoundation.org**