

## 29th Regional Congress of the ISBT Basel, Switzerland, June 22 - 26, 2019

In conjunction with Swiss Transfusion SRC and the Swiss Association for Transfusion Medicine



## APPLICATION FORM EDUCATIONAL GRANT

Personal Information			
First name:			
Last name:			
Email address:			
Country of Origin:			
Date of birth (dd-mm-yyyy)			
Professional Information			
Institution/Organisation:			
Position:			
Have you submitted an abstract for ISBT Basel	()YES	( ) NO	
If yes, what is your submission number:			
Are you a member of the ISBT:	()YES	( ) NO	
If yes, please inform us of your membership number	<u>:</u>		
Motivation please write a short motivation on why this grant sho	ould be awarded	to you.	