



## FELLOWSHIP PROGRAM

### Information and Application

The ISID Fellowship Program was established in 1992 to promote collaboration among researchers in different countries. These awards are not restricted to physicians and are intended to allow scientists from developing countries to update their knowledge of new laboratory approaches or to learn specific techniques in infectious diseases research. Projects that enhance the transfer of technologies to geographical areas where they are particularly needed will be favored.

Up to two fellowships will be awarded each year. Funding will be provided for up to 3 months and up to US \$7,500.

#### **Eligibility:**

Investigators younger than 40 who already working in a research area, but have not had an opportunity to work or study outside their country or region.

#### **Deadline:**

The annual deadline is **March 1**, and applicants will be notified after June 1.

#### **How to apply:**

Proposals will be reviewed by members of the Professional Development Working Group and decisions made in collaboration with the President and the Program Director.

To be considered for the Fellowship, applicants must submit the following documents:

- A completed application form
- A research plan
- A current curriculum vitae
- A letter of agreement from the sponsor
- A current curriculum vitae of the sponsor

The ISID will not designate or request sponsorship on behalf of the interested individual. The fellowship will support research rather than course studies. The individual submitting the application must secure an invitation and make all necessary arrangements.

Upon completion of the fellowship, a written report of goals accomplished must be sent to the Society.

#### **Completed proposal applications should be submitted to:**

ISID  
Professional Development Working Group  
181 Longwood Avenue  
Boston, MA 02115 USA  
Tel. (617) 277-0551 / Fax. (617) 731-1541 / E-mail. [info@isid.org](mailto:info@isid.org)

*For further information, please direct your inquiries to the Professional Development Working Group at [info@isid.org](mailto:info@isid.org).*

# International Society for Infectious Diseases Fellowships Program

Application Form

*Please type or print clearly*

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1. Project Title:

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2. Start and end dates of proposed project (month/year):

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3. Name of applicant (last, first, middle):

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4. Present title/position:

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5. Current address (Department, Institution, Address, Phone Number, Fax Number. E-mail if available):

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6. Institution where work will be done (Department, Institution, Address, Phone Number, Fax Number, E-mail if available):

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7. The undersigned have reviewed this application for an ISID Fellowship and accept the obligation to comply with all conditions, policies, and objectives of the ISID.

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a. Applicant	Signature	Date
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b. Sponsor	Signature	Date
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8. Address where checks should be mailed or other payment instructions:

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# International Society for Infectious Diseases Fellowships Program

## Project Summary

Applicant Name: \_\_\_\_\_

The research project should be based on a clear hypothesis statement highlighting the scientific or public health problem(s) to be investigated. In addition to providing a project summary below, please attach a detailed research plan that includes information on specific research aims, background and justification, preliminary studies, research design and methods, limitations (if any), expected application of results, and references. The written plan may NOT exceed 5 single-spaced pages in length.

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1. Project title:

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2. Hypothesis statement:

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3. Project summary (must be completed on this page)

# International Society for Infectious Diseases Fellowships Program

Proposed Budget

Applicant Name: \_\_\_\_\_

Project start and end dates: \_\_\_\_\_

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1. Travel:

Sub total \$ \_\_\_\_\_

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2. Living expenses (itemize):

Sub total \$ \_\_\_\_\_

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3. Laboratory fees (itemize):

Sub total \$ \_\_\_\_\_

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4. Other expenses (itemize):

Sub total \$ \_\_\_\_\_

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5.

TOTAL \$ \_\_\_\_\_

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