

|  |  |
| --- | --- |
| **Applicant (Last, First)**      | **Academic Title**      |
| **Email Address / Telephone Number**      | **Name of University**      |
| **Sponsoring Faculty (Last, First)**      | **Academic Title**      |
| **Email Address / Telephone Number**      | **Name of University**      |

*In the box below, provide a 1-page abstract of the overall traveling fellowship plan. Concisely describe the central goal(s) of the applicant’s research program and explain how a travel grant would facilitate this program.*

*Please create a pdf that includes this 1-page form and the following: NIH biosketch for the sponsoring faculty and applicant and letter of support from host institution and from Department Chair or Supervisor of the applicant. Please submit this pdf application by email to* *info@ptresearch.org*

Fellowship Plan:

Expertise of investigators:

Proposed use of funds:

Travel Dates (if known):

Applicant #1 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Applicant #2 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_