RESIDENT TRAVEL GRANTS

HOW TO APPLY

The enclosed application should be submitted with the following materials as attachments:

- Curriculum Vitae
- Description and Discussion of a Pediatric Allergy-Immunology Case
- Letter of Recommendation from the Pediatric Program Director

PLEASE RETURN COMPLETED APPLICATION ELECTRONICALLY TO:

American Academy of Pediatrics
Attn: Debra Burrowes
Technical and Medical Services
345 Park Blvd.
Itasca, IL 60143
dburrowes@aap.org

For additional information, contact Debra Burrowes, Division of Technical and Medical Services at dburrowes@aap.org or 630/626-6427.
RESIDENT TRAVEL GRANT APPLICATION

2018 AAP National Conference and Exhibition
November 3-6, 2018
Chicago, IL

DEADLINE FOR SUBMISSION – June 1, 2018

Please type or print clearly.

A. GENERAL INFORMATION (Please provide contact information where you can be reached at any time until the day of the national conference.)

Name: ________________________ AAP Member ID: ______________________
(If not an AAP member, leave blank)

Mailing Address: _______________________________________________________
____________________________________________________________________
____________________________________________________________________

Phone No: ________________________ E-mail Address: _____________________

Name of Institution: _____________________________________________________

Name of Pediatric Program Director: ______________________________________

Start Date: _________________ Expected Date of Completion: ________________

B. EDUCATION AND TRAINING: Include a copy of your CV.


D. LETTER OF RECOMMENDATION FROM PEDIATRIC PROGRAM DIRECTOR

Remember: If you are asked to present your case, the maximum allotted time will be 10 minutes for the case details and 5 minutes for the discussion of the case.