BNA EARLY CAREER BURSARIES
APPLICATION FORM

## BNA2019 Festival of Neuroscience, 14-17 April 2019 - CCD, Dublin, Ireland

For Students and Early Career Researchers or Clinicians only –

please check the criteria for [early career members](https://www.bna.org.uk/about/membership/)

Completed forms should be returned to the BNA office: office@bna.org.uk

The deadline for receipt of bursary applications is **0900h Monday 10th December 2018**

## Qualifying criteria:

* the applicant must be a member of BNA at the time of application and, in addition, must have been a member of the BNA prior to 1st February 2018
* the applicant must NOT have received a bursary from the BNA to attend a previous Festival of Neuroscience
* the applicant must be currently registered as an undergraduate or as a postgraduate or have been awarded their PhD (date of successful *viva voce*) or completed their F2 no earlier than 1 January 2014
* the applicant must be registered for the BNA2019 meeting and have had their abstract accepted for poster presentation
* the applicant will be presenting a poster as FIRST AUTHOR
* the expectation is that applicants will have sought additional funds from elsewhere

# Application form:

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|  |  |
| Name: |  |
| BNA membership number:  |  |
| Department: |  |
| Institution/ Affiliation: |  |
| Email: |  |
| Course of study:*(UG/PG students)* |  |
| Name of supervisor:*(UG/PG students)* |  |
| Month and year PhD was awarded/ completion date of F2 (*early career researchers/ clinicians*): |  |
| Title of submitted poster abstract (s): |  |
| Estimated cost of travel/accommodation\*: |  |
| Other costs\*: |  |
| How much are you applying for (up to £300)? |  |
| Where else are you seeking funding from, and how much? |  |

\* Successful applicants will be expected to provide scans of all receipts corresponding to travel and accommodation towards the meeting

\*\*details of applicants will be retained by the BNA for purposes of administering the bursaries for this and future BNA Festivals for a period of 8 years, after which they will be deleted. See more information about our data protection notice at <https://www.bna.org.uk/disclaimer/>

# Your time at BNA2019:

Please explain in the box below – in no more than 200 words – how you expect to benefit from attending the meeting:

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| --- |
|  |

By signing this form, you are confirming that you are eligible to apply for a BNA bursary and have not previously received a bursary from the British Neuroscience Association.

Applicant’s signature:

Date:

Supervisor’s signature (if applicable): \_\_\_\_\_\_\_\_\_

Date: