|  |
| --- |
| **Society for Research in Hydrocephalus and Spina Bifida****SRHSB/Integra Graduate Travelling Fellowship Program 2025** **Please submit Application to the SRHSB Hon Secretary:** **honsec@srhsb.com****Extended Application deadline: Wednesday April 30th, 2025** |
| **Applicant’s name** |  |
| Applicant’s Department/Institution address |   |
| Email |  |
| **Applicant’s CV (2 pages)**Please submit together with Application form **(check box):**  |
| **Personal statement (150 words)** |
| **Head of Department/ Supervisor of proposed visit**  |  |
| Address of Institution(s) to be visited  |  |
| Visiting Head of Department/ Supervisor’s e-mail |  |
| **Title of visit and any relevant project** |  |
| **Duration of visit** (weeks) |  |
| **Visit proposal including any relevant project** (**500 words,** include cost justifications) |
| **Expected visit/project outcomes** (**100 words**) |
| **Home Letter of Support** Please submit together with Application form **(check box):** |
| **Hosting Department/Institution Letter of Support** Please submit together with Application form **(check box):** |

V08-04-2025