

Malaysian Society of Parasitology and Tropical Medicine (MSPTM) Travel Grant Award

APPLICATION FORM

PARTICULARS OF MEMBER

1. Name (as in identity card):
2. Applicant's identity card number/ Passport number:
3. Nationality :
4. Telephone :
5. Email :
7. Department/Faculty/University/Postcode:

DETAILS OF TRAVEL

1	Travel purpose
2	Travel destination
3	Travel period : _____ to _____ (_____ days)
4	Background of conference
5	Abstract of oral presentation (maximum 300 words) (Please include the background of research, objectives, methodology, results and conclusion)
6.	Expected Outcome/Benefits

7.	Expected expenditure:
	i) Registration Fees (please attach brochure) : RM _____
	ii) Air/Land Transportation (please attach flight itinerary): RM _____
	iii) Meal : RM _____
	iv) Accommodation : RM _____
	v) Others (please specify) : RM _____
	Total : RM _____

Please attach the following documents together with application form:

- a) Proof of abstract acceptance to conference
- b) Brochure of the conference
- c) Flight itinerary

Applicant signature:

Date:

NOTE: PLEASE SEND THE COMPLETED FORM TO: secretarymsptm@gmail.com