



Travel Award Application

Pathology Informatics Summit 2017 Conference

Application Deadline: February 24, 2017

Name: _____

Address: _____

City, State, Zip: _____

Daytime Phone Number: _____ Cell Phone Number: _____

E-Mail: _____

Training Institution: _____

Institution Address: _____

Residency (AP, CP, AP/CP) / Fellowship / Program of Study (Pick one)

Start Date in Training Program (mm/yy) _____

Anticipated Completion Date (mm/yy) _____

Training Program Director: _____

Training Program Director Title: _____

Training Program Director's E-Mail: _____

Applicant Signature: _____

Residency Program Director Signature: _____

Please send the completed application, narrative summary and curriculum vitae to:

Pathology Informatics Summit 2016 Conference
Informatics Award / ATTN: Beth Gibson
Department of Pathology Informatics
University of Michigan
1301 Catherine Street, MSI 4227
Ann Arbor, MI 48109

E-Mail: bethgibs@umich.edu

FAX: 734-615-2511