

2015 ASHI Travel Stipend Application

1. ASHI member:

Yes

No

First Year as a member:

2. Committee membership:

Yes

No

Committee Name:

Role on committee (chair/member):

3. ASHI Quarterly or Human Immunology article author:

Yes

No

Citation:

4. ASHI Annual Meeting poster presenter:

Yes

No

Citation:

5. ASHI oral abstract presenter:

Yes

No

Citation:

6. ASHI regional case study presenter:

Yes

No

Meeting location and date:

7. ASHI Inspector:

Yes

No

Laboratory and Date:

8. Other service to ASHI:

Yes

No