



## 17<sup>th</sup> International Zebrafish Conference

### Conference Award

Through grant support from the National Institutes of Health, the Company of Biologists and the Society for Developmental Biology, the International Zebrafish Society (IZFS) is pleased to be able to offer financial assistance for in-person or virtual attendees. These monies could be used for travel or registration. Please return this form via e-mail to [info@izfs.org](mailto:info@izfs.org) by 05/16/2022.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email address: \_\_\_\_\_

IZFS Member: Yes \_\_\_\_\_ No \_\_\_\_\_ SDB Member: Yes \_\_\_\_\_ No \_\_\_\_\_

SDB Member Number: \_\_\_\_\_ Position: \_\_\_\_\_

Gender:  Female  Male  Other (specify) \_\_\_\_\_  Decline to Answer

Race/Ethnicity: Select all that apply

- |   |  |
|---|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Pacific Islander                |
| <input type="checkbox"/> Hispanic or Latino               | <input type="checkbox"/> Indigenous                      |
| <input type="checkbox"/> South Asian                      | <input type="checkbox"/> White                           |
| <input type="checkbox"/> Southeast Asian                  | <input type="checkbox"/> Other                           |
| <input type="checkbox"/> East Asian                       | <input type="checkbox"/> Middle Eastern or North African |
| <input type="checkbox"/> Black or African American        | <input type="checkbox"/> Prefer not to answer            |

### **Assistance Requested**

#### **Conference Award Amount \$300.00**

Additional requested funds \$ \_\_\_\_\_ Total Amount requested (USD):\$ \_\_\_\_\_

Justification for application (i.e., why local or grant funds are unavailable): \_\_\_\_\_

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Explanation for why your attendance at this meeting is essential: \_\_\_\_\_

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Name and address to mail the reimbursement check:

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Check should be made payable to: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

I confirm that the above details are correct.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Please return this form via e-mail to [info@izfs.org](mailto:info@izfs.org).