

FEMS NATIONAL / REGIONAL CONGRESS START-Up Grant Application Form

(Deadlines Dec 15th and June 1th)



General Information

Congress Title:

Meeting's Aim and Scope:

Meeting Dates:

Meeting Venue:

What is the estimated number of participants?

Professionals:

Students:

Total:

What is number of members of the congress organizing society?

Total:

What is number of members of all societies (for regional congresses)?

Total:

Name meeting organiser:

Corresponding contact
Name and address:

Tel:

Fax:

Email:

*FEMS Business Office
Delftechpark 37a
2628 XJ Delft
The Netherlands
T: +31-15-301 00 50
E: fems@fems-microbiology.org
I: www.fems-microbiology.org*

*Registered Charity,
(No. 1072117)
Company Limited by Guarantee
(No. 3565643)
Registered in England*

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Budget Information

MEETING:

Title:	
Date:	
Venue:	

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INCOME:

Amounts in EUR only

Professional Registration Fee: (€)	x (number)	=	€
Student Registration Fee: (€)	x (number)	=	€
Trade Exhibition:			€
GRANTS:			
1. FEMS Meeting Grant (requested amount):			€
2. Organising Society: (• applied; • granted; please tick)			€
3. University/Academy: (• applied; • granted; please tick)			€
4. Other, please specify: (• applied; • granted; please tick)			€
5. Other, please specify: (• applied; • granted; please tick)			€
Surplus on meals/accommodation:			€
TOTAL INCOME:			€

EXPENDITURE:

Accommodation / Hire Charges:

Hire of Lecture Rooms:	€
Hire of Other Rooms:	€
Hire of Poster Boards:	€
Hire of Audio-Visual Equipment:	€
Audio-Visual Technicians:	€
Invited Speakers Travel:	€
Invited Speakers Accommodation / Meals:	€

Secretariat:

Circulars:	€
Website:	€
Stationary / Photocopying:	€
Postage:	€
Telecom costs:	€
Secretarial Assistance:	€
Committee Travel:	€

Delegate Services:

Programme / Abstracts Book:	€	
Participants List / Maps, etc.	€	
Bags & Badges:	€	
Conference Transport:	€	
Receptions:	€	
Conference Dinner:	€	
Excursions:	€	
Other (specify!):	€	
Laboratory Supplies (only for Workshop Applications)	€	
Contingency:	€	
TOTAL EXPENDITURE:		€

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Endorsement by FEMS Delegate of FEMS Member Society (Delegate of the host society for Regional congresses)

Please offer an opinion on the following (*tick relevant box*)

1. The quality of the programme (as judged by the relevance of the topics, the balance of those aspects listed for discussion and the overall quality of the listed speakers):

Low Moderate High

2. The probable impact of the meeting at the:

National level: Low Moderate High

International level: Low Moderate High

3. Will your society financially support the meeting: Yes No

If yes, please indicate amount in EUR:

4. Will your society/societies assist with the administration of the meeting: Yes No

5. Comments on the programme and budget:

Name of endorsing FEMS Delegate:

Signature:

Date of signing:

*Provide name and address details of contact person in country where meeting is held:
(only in case of endorsement by a multinational society or a society located outside the country where the meeting is held – see regulation no 4).*

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