# Meeting Organizer Grant - Supervisor/Line Manager Endorsement

**Please complete this form, ensuring that your home Supervisor or Line Manager completes Sections J, K, L, and M and upload it to your** [**online**](https://mc.manuscriptcentral.com/fems-go) **application.**

|  |  |  |
| --- | --- | --- |
| A | Name of Applicant | Click or tap here to enter text. |
| B | Applicant e-mail address | Click or tap here to enter text. |
| C | Home Institution | Click or tap here to enter text. |
| D | Meeting Title | Click or tap here to enter text. |
| E | Name of home Supervisor /Line Manager | Click or tap here to enter text. |
| F | Home supervisor e-mail address | Click or tap here to enter text. |
| G | Host Institution | Click or tap here to enter text. |
| H | Name of host Supervisor/ Line Manager | Click or tap here to enter text. |
| I | Host supervisor e-mail address | Click or tap here to enter text. |

**To be completed by home Supervisor / Line Manager**

|  |  |  |
| --- | --- | --- |
| J | Endorsement statement **(Please add a brief statement in support of the applicant)** | Click or tap here to enter text. |
| K | Confirmation to be completed | I confirm that any necessary agreements are in place between [type the name of the home institution] and [type the name of the host institution] with respect to conducting the proposed project. |
| L | Name  | Click or tap here to enter text. |
| M | Signature |  |