## MCW GRADUATE SCHOOL Office of Postdoctoral Education

## **Postdoc Professional Development Award**

Please complete and submit this application to the Office of Postdoctoral Education via email (postdoc@mcw.edu) by January 26<sup>th</sup>, 2024 @ 5pm to be eligible for this award. Events eligible for this award must have occurred between July 1st, 2023 and December 31<sup>st</sup>, 2023. Events beyond December 31<sup>st</sup> may be used for the Spring, 2024 award cycle. Awards in amounts up to \$750 will be administered by direct deposit (Please note, this amount is taxable). Incomplete or inappropriate applications and/or failure to follow application directions may result in disqualification. Postdocs who have won the award in the immediately preceding cycle (Spring, 2023) do not qualify for this award but may apply for subsequent cycles. Please email questions to postdoc@mcw.edu.

	this award bu	t may apply for subseque	ent cycles	s. Pleas	e email qu	uestions to	postdoc@mcw.edu.
Applicant's Name:	Depa	artment:					
Applicant's Phone	: Appl	licant's email:					
	-	ronologically (start fro		recent	and wor	k back) a	at MCW
(date started, date	enaea, princip	al investigator's name	)				
Have you applied t	or the Postdoo	: Professional Develop	ment av	vard be	efore?	□ Yes	□ No
Have you won the of award:	Postdoc Profe	ssional Development a	ward be	fore?	□ Yes	□ No	If yes, date
	ostdoc at MCW	revious conferences/m d, if no meetings attend ive event.					
1.							
2.							
3.							
4.							
5.							
	r conferences/	elp reimburse past exp networking relevant to					arch.
☐ This Award is fo		•					
☐ This Award is fo							
☐ OTHER. PLEAS							
Name of the event	:						
Dates:	Web	site URL with conferen	ce desc	ription	(if appli	cable):	
Estimated Cost:	Expense 1		\$	.00			
	Expense 1		\$	.00			
	Expense 1		\$	.00			
		Total:	\$	.00			
What other source	s of travel fund	ds do you have? Chec	k all that	apply.			
□ Own Grant □	☐ PI's Grant	☐ Dept. Funds ☐	1 Other	<sup>r</sup> Travel	Award	$\Box$ $P$	ersonal Funds

For Conferences:
Title of abstract (if applicable):
Date of abstract submission (If applicable, proof of acceptance must be submitted for reimbursement):
Abstract has been accepted for: □ Talk □ Poster □ Acceptance Pending □ N/A
If acceptance is pending, the abstract submission was for: □ Talk □ Poster □ N/A  Have you attended this event (in virtual or physical form) before? If yes, how many times?
Please carefully answer the following questions. <u>Failure to comply with the word limit will disqualify your application</u>
1. Why was this specific conference or training chosen? (not exceeding 150 words)
2. How will this conference or training enhance your current and future research career aspirations? (not exceeding 150 words)
To the best of my knowledge, this application is filled-out completely and accurately.
By typing your name, you are electronically signing this document.
Questions? Contact the Office of Postdoctoral Education Phone: 414-955-4461 / Email: postdoc@mcw.edu.