**ASSOCIATION FOR THE STUDY OF ANIMAL BEHAVIOUR**

**APPLICATION FOR AN Interdisciplinary Workshop Grant**

Please save the completed application form as ‘*Surname*IW.docx’ (or .pdf) and submit as an email attachment to the klessells.science@gmail.com

For closing dates, eligibility etc, see the [Grants section of the ASAB website](https://www.asab.org/grants-and-awards).

**Note: Applications will NOT be considered unless two referees’ reports have been received by the appropriate closing date.**

**Applicant’s Details**

Name (including title):

Address:

Telephone number:

Fax number:

Email address:

University Education (include type and subject of degree, class, when obtained, Institution awarding degree, e.g. BSc (Hons) Zoology, 2i, 1980, University of ....)

Current position (inc. date of appointment):

List the dates of all previous applications under this fund and their outcome:

Recent publications (to a maximum of 3):

Brief statement of current research interests (to a maximum of 50 words):

I certify I am a current member of ASAB

Yes / No Date:

**Details of proposed workshop**

**Title:**

**Proposed start and finish dates:**

**Proposed venue:**

**Rationale of proposed workshop:**

(This should include a brief background to contextualize the importance and the interdisciplinary nature of the topic and a statement of the proposed goals. This must be self contained in the following two pages)

**What is the proposed format and content of the workshop?:**

(e.g. pre-circulated papers, talks, discussants, rapporteurs, round-table discussions, meetings of sub-groups and plenary sessions, pre- post-workshop comments on manuscripts etc.)

**How many attendees are envisaged?**

**How many will be invited?**

**How will the workshop be advertised?**

**List of proposed attenders:**

(specify whether they have already been invited and whether they have confirmed attendance)

**Itemised summary of grant requested**

Please provide a detailed budget of all costs, and a justification for the ASAB support requested.

TOTAL AMOUNT REQUESTED:

PLEASE PROVIDE DETAILS OF INSTITUTIONAL ACCOUNT TO WHOM GRANT CHEQUE SHOULD BE PAID IF THE APPLICATION IS SUCCESSFUL AND ADDRESS TO WHERE CHEQUE SHOULD BE SENT.

INSTITUTIONAL ACCOUNT:

ADDRESS TO WHICH CHEQUE SHOULD BE SENT:

**References:**

Provide names and addresses of 2 referees who will comment on the proposed research:

The applicant should contact these directly and pass on the enclosed form for referees. Applicants should request their referees to send their reference directly to the [Secretary of the Grants & Awards Committee](https://www.asab.org/grants-committee) and ensure arrival by the closing date for applications.

**STATEMENT BY REFEREE 1**

Applicant's name:

The above has applied for an ASAB Interdisciplinary Workshop grant. In order to evaluate this request I would be grateful if you could comment on the quality of the applicant’s work, the interdisciplinary and topical nature of the proposed workshop, and any other comments you wish to make. You may use this form or an email containing the above information.

Name of referee:

Address:

Relationship to applicant:

Date:

Once completed please email the form to klessells.science@gmail.com

**STATEMENT BY REFEREE 2**

Applicant’s name:

The above has applied for an ASAB Interdisciplinary Workshop grant. In order to evaluate this request I would be grateful if you could comment on the quality of the applicant’s work, the interdisciplinary and topical nature of the proposed workshop, and any other comments you wish to make. You may use this form or an email containing the above information.

Name of referee:

Address:

Relationship to applicant:

Date:

Once completed please email the form to klessells.science@gmail.com