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| For office use | Received date: |

# Application Form

# **WCE 2024 JEA Travel Award**

To WCE 2024 JEA Travel Award Committee:

I am submitting the following documents for consideration of a travel award for the WCE 2024. I certify that all information below and attached is true and accurate.

**Applicant’s Signature:　　　　　　　　　　　　　　　　　 　　　　　　Date:**

 (month/day/year)

(Note)

1．Your personal data will only be disclosed and used for this selection only.

2．Insert additional rows when necessary.

3. With the exception of ‘Education’, please list all entries in reverse chronological order (most recent first)

**JEA Membership #:　　jeap**

**Name：**

**Sex：**

**Date of Birth： 　　　　　　　　　　　　　　 　　　　　　　Age:**

**Nationality：**

**Email Address：**

**Tel:**

**Education (after high school; chronological order):**

**Work Experience (academic and professional positions (position, institution, location, and primary activity)):**

**Awards and Honors:**

**Other Academic and Professional Activities:**

**List of Publications (peer reviewed, within previous 5 years):**

**Personal Statement** (500 words or less, please describe your interests in attending the WCE 2024 and how you hope your attendance might contribute to your professional development):

Contact:

JEA Travel Award Committee

Co: Japan Epidemiological Association

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