

**European Association for Cranio-Maxillo-Facial Surgery
(EACMFS)
ENDOWMENTS COMMITTEE**

APPLICATION FOR LEIBINGER PRIZE

(Please type or use BLOCK CAPITALS and ensure that both sides are completed)

Surname _____

First Name _____

Date of Membership of
EACMFS _____

Present Post/Appointment _____

Address _____

Date of Appointment _____

Details of Centre to be visited

Name of Hospital/Institute _____

Head of Department _____

Nature of study/experience to be gained _____

Proposed dates of visit _____

Estimated expenses(€uro): (a) travelling _____

(b) subsistence _____

Documentary support

1. Head of Department of present post/appointment

I support this application and confirm that a salary will continue to be paid during the period of leave of absence

_____ (signature)

_____ (Name)

2. Confirmation that written approval has been received from the Head of Department to be visited (please enclose a copy with this application) YES/NO

3. EACMFS Council Member (normally the appropriate National Councillor)

I am aware of the applicant's training and abilities and support this submission

_____ (signature) _____ (Name)

I agree that if successful in this application I will submit a report to the Secretary-General within three months of returning and that the copyright of any paper resulting from the scholarship will rest initially with the Editor-in-Chief of the Journal of Cranio-Maxillofacial Surgery

_____ (signature) _____ (Date)

PLEASE APPEND DETAILED CURRICULUM VITAE (to include details of previous appointments with dates/prizes/awards/distinctions etc and publications)

PLEASE HIGHLIGHT BELOW

- Career aspirations
- Contributions already made to the specialty
- The aims, objectives and gains anticipated from the training programme which it is planned to visit. Please note this should preferably be within Europe, allow active participation in clinical patient care and normally be of not more than three months duration

It is strongly recommended that prospective candidates seek advice and approval from the respective national bodies supervising the training programmes BEFORE submitting this application

Please return this application form via email when FULLY completed to:
Secretary-General EACMFS - secretariat@eacmfs.org

DEADLINE for applications: 30th June in the year preceding the Congress