

EvansMDS Micro-Sabbatical Application

Applicant Name (Visiting Scientist):

PI of Applicant's Home Laboratory:

Institution:

City, State:

PI of Host Laboratory:

Institution:

City, State:

Estimated Length of Micro-Sabbatical: (days)

Budget Estimate:

Transportation:

Lodging:

Meals:

Total: \$ 0.00

Reimbursement will be provided based on actual expenses incurred, up to \$10,000. Original receipts must be submitted after travel is complete.

Expenses must comply with the Travel Policy for the EvansMDS Micro-Sabbatical Initiative.

Non-compliant expenses will not be eligible for reimbursement.

I have read and agree to comply with all terms of the Travel Policy for the EvansMDS Micro-Sabbatical Initiative:

Signature of Applicant

Purpose of Micro-Sabbatical:

[Provide a brief description of the research question, what will be accomplished during the visit, and how the goals of the micro-sabbatical will advance the research.

Include how the research project is funded currently (source(s) and amount(s) of funding). Explain why travel and meeting in-person are necessary to achieve these goals.]

Application must include:

- Completed form (this document)
- Two letters of support (one from Home Laboratory PI and one from Host Laboratory PI)

Assemble as single PDF and submit via email to: grants@epefoundation.org