

Young Scientist Awards

The EFP offers Young Scientist Awards to stimulate the participation of young parasitologists and thus to contribute to the advancement of parasitological research in Europe.

Five prizes will be awarded for original research work in parasitology (400 € each). Prizes include a diploma and refunding of EMOP registration fees.

Candidates must be less than 35 years old and be citizens of a member (or associated member) country of the EFP (<http://www.eurofedpar.eu/members>); citizens of suspended member countries cannot apply.

The paper must be solely authored by the candidate and presented in oral form at EMOP 2016. The research must have been based at an institution of an EFP member / associated member country.

How to apply:

The following documents have to be submitted:

- (1) The completed application form, signed by the candidate and the head of the department where the research was done.
- (2) A manuscript of up to 10 pages describing the work. The manuscript should not have been published before, and is only for the information of the jury. The candidate should be the sole author of the manuscript.
- (3) Proof of registration for the congress. At registration, the EMOP organizers should be informed of the intention to apply for the award.
- (4) Proof of age and nationality (copy of passport / ID) and a short curriculum vitae (one page).

The paper will be orally presented (15 min) by the candidate during a special session organized during the EMOP congress. This condition is mandatory for the award selection.

Form, manuscript and accompanying information are to be sent to:

Dr. Thomas ROMIG, 1st Vice President of EFP
Universität Hohenheim
FG Parasitologie 220B
Emil-Wolff-Str. 34
70599 Stuttgart, Germany

tel: +49 711 459 23076
Email: Thomas.Romig@uni-hohenheim.de

not later than the June 15th 2016

Awards will be announced at the closing ceremony of EMOP.



YOUNG SCIENTIST AWARD



Your photo

INSTITUTE:

ADDRESS OF THE INSTITUTE:

NAME OF CANDIDATE:

FORENAME:

ADDRESS:

AGE:

GENDER:

TITLE OF RESEARCH:

PLACE OF RESEARCH:

HEAD OF THE DEPARTMENT:

I hereby certify that the research to be presented was carried out in our department.

Signature of the Head of the Department.....

I accept all mentioned terms and conditions.

Signature of the candidate.....DATE:.....