**TBVI Award 2025 – Application Form**

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| **Contact data** | | |
| Name |  | |
| Surname |  | |
| Email address |  | |
| Phone number |  | |
| **Current position** | | |
| Status (e.g., PhD, Postdoc, Researcher) |  | |
| University/Institution |  | |
| Major field of research |  | |
| Total years of working experience |  | |
| PhD obtained | Yes/no  If yes, please specify date: | |
| **Summary of the applicant’s most relevant scientific achievements obtained thus far***(max. 100 words)* | | |
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| **Proposed work to present at the TBVI Annual Symposium** *(max. 100 words)* | | |
|  | | |
| **Describe how the proposed presentation fits with (one of) the TBVI strategic directions** *(max. 100 words)***;**   * Diversifying and innovating the TB vaccine pipeline * Accelerating clinical development of TB vaccine candidates * Ensuring public health impact | | |
|  | | |
| **Motivation outlining why the applicant should be considered for the award and why this award is relevant for the applicant’s professional experience.** *(max. 100 words)* | | |
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| **Date:**  **Please send this application form to:** [**info@tbvi.eu**](mailto:info@tbvi.eu) **no later than 11 November 2024** | |  |
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