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for APSR Multi-Society Research Project

# **Application form**

**Please submit this form to** [**research@theapsr.org**](mailto:research@theapsr.org) **no later than 31 May 2025.**

##### Applicant

Name:

Country / Region:

Affiliation:

Email address:

APSR Membership:

\*Please write your en bloc society name or individual membership no.

##### Application Date

dd / mm / 20yy

##### Fund request

US$

##### Project title

##### Project term

(In principle, the duration of the project shall be two years)

dd / mm / 20yy ~ dd / mm / 20yy

##### Project team members

(The project team must be all APSR assembly members from two or more en bloc societies and from two or more countries /regions in the Asia-Pacific region and there must be at least 4 members in the team)

**Principal investigator**

Name:

Country / Region:

Affiliation:

Email address:

Your membership type:

( )APSR en bloc member ( ) APSR Individual member

APSR Membership No:

**Co-Investigator**

Name:

Country / Region:

Affiliation:

Email address:

Your membership type:

( )APSR en bloc member ( ) APSR Individual member

APSR Membership No:

**Co-Investigator**

Name:

Country / Region:

Affiliation:

Email address:

Your membership type:

( )APSR en bloc member ( )APSR Individual member

APSR Membership No:

**Co-Investigator**

Name:

Country / Region:

Affiliation:

Email address:

Your membership type:

( )APSR en bloc member ( ) APSR Individual member

APSR Membership No:

Add more Co-investigator(s) if necessary

##### Project summary

##### Purpose and Necessity

(including the impact/relevance to the Asia-Pacific region)

##### Background

(including the previous studies and preliminary data)

##### Methods

(including the organization of the research team and the background of the members)

##### Expectation and application of the results

(including the impact of the research on the current understanding)

##### References

##### Timeline

##### Budget plan

(The fund will be transferred to project team members’ institution(s), not a personal account. Any administration charge by the institution for processing the fund is to be included in the budget plan)

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| **Applicant’s signature** \*You can paste an image of your signature.  Date:  Name: |