

**HISTORICAL LIBRARY
CUSHING/WHITNEY MEDICAL LIBRARY
YALE UNIVERSITY**

**FERENC GYORGYEY RESEARCH TRAVEL AWARD
IN THE HISTORY OF MEDICINE**

Application for FY 2009-2010

1. Applicant's Name: _____

2. Short Title of Project: _____

3. Present Affiliation: _____
(title)

(department)

(institution)

(street)

(city, state, Zipcode)

5. Home Address: _____
(street)

(city, state, Zipcode)

6. Telephones: _____
(work) (home) (fax)

7. E-mail address: _____

8. References: Please provide contact information for two people who will be sending letters of recommendation based on this particular proposal.

A. _____
(name)

(affiliation)

(phone)

(e-mail)

B. _____
(name)

(affiliation)

(phone)

(e-mail)

9. Curriculum vitae: Attach your CV (abbreviated form is fine). Please include:

- a. Educational history. Include any program in which you are currently enrolled, the institutions, fields of study and degrees conferred .
- b. Research and professional experience.
- c. Personal bibliography.

10. Project proposal: attach a description (no more than 2000 words) of your proposed research, how it relates to your broader research goals, and how the resources of the Historical Library are relevant .

11. Approximate date of visit to the Historical Library: _____

12. Budget: Attach an estimated budget including travel, subsistence while in New Haven, and costs for reproductions.

13. Agreement and signature:

I certify that the information in this application is true to the best of my knowledge.

(signature)

(date)

Please mail to Historical Library, Cushing/Whitney Medical Library, Yale University, P.O. Box 208014, New Haven, CT 06520-8014 by March 20, 2009.