ECOG-ACRIN APP Committee Application for Financial Support to attend the

Fall 2025 ECOG-ACRIN Group Meeting in Philadelphia, PA

Please complete this form and **submit via email to** [**bridget\_o’brien-fagan@rush.edu**](mailto:bridget_o'brien-fagan@rush.edu)

Travel expense reimbursement per travel guidelines policy will be awarded to each candidate selected.

**Application deadline is September 8th, 2025.** Late applications will not be considered.

Travel funding recipients will be notified via email by **September 12th,2025,** if they have been awarded support.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates of Meeting: October 22-24, 2025

ECOG-ACRIN institution name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APP experience (# years): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ ECOG-ACRIN APP Committee experience (# years): \_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever attended an EA meeting in person? \_\_\_\_\_\_\_\_\_ If yes, date of last meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you received financial support from this committee in the past? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, list the date of meeting for which you received funding: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of APPs from your institution attending this meeting, excluding yourself: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide a brief summary of your interest/involvement with ECOG-ACRIN, and future goals in working with this committee. Please include your reason for requesting financial support and include what you may gain from attending this meeting.

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Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_