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**ASI ABBVIE NEW HORIZONS RESEARCH AWARD APPLICATION**

**Instructions**

* Enter the information listed below. For YES/NO questions, delete as required
* Please do not scan these forms just save as pdf
* Rename the form to ‘LASTNAME YYYY\_AbbVie’ and submit in pdf format as per website instructions.

**Personal Details**

Name:

Email:

Current Organisation / Department:

**ASI membership**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Are you a full ASI member ? | YES | NO |
| Note: If you answered ‘NO’ you are strongly encouraged to join or renew your ASI membership prior to application.  |

**Agreement to Terms and Conditions**

I agree to the Terms and Conditions YES NO

**CV**

Please include a CV (max 1 page)

**Publications List**

Please include a list of publications in the last 10 years (taking into account career disruptions).

Please note that pre-prints may be included in the publication list, but not articles in preparation or under review.

**Vision, research Interests, planned use of funds**

Outline your vision and research interests, ensuring they align with AbbVie’s key focus areas. You may wish to include how these funds will be used to advance your research interests (max 1/2 page).