# Louise Krisko Education and Travel Support Application

**APIC Member Number:** Click or tap here to enter text.

**Name:** Click or tap here to enter text.

**Employer:** Click or tap here to enter text.

**Preferred Mailing Address:**

**Address 1:** Street Number

**Address 2:** Apt/Suite

**City:** Click or tap here to enter text.

**State-Zip:** Click or tap here to enter text.

**Phone:** Click or tap here to enter text.

**Email:** Click or tap here to enter text.

**Applicants must meet the following criteria:**

1. Current membership in APIC-MN.
2. Currently practicing infection and epidemiology.
3. Has not previously attended an APIC Annual Conference (exception APIC International Conferences held in Minneapolis).
4. Willingness to share the APIC International experience with the APICMN membership at large.

**The scholarship will cover the following costs:**

1. Early bird registration fees for the APIC Annual conference.
2. Travel expenses, including airfare and ground travel, to and from the hotel and airport.
3. One half of the hotel accommodations for a double room.

Please submit application by **November 30th** to DAL@apicmn.org