



International Society for Burn Injuries
Professor Aikawa Young Investigator Award Application

Please type or print all information.

Date of Application: _____

Applicant Name _____

Complete Mailing Address _____

City _____ State _____ Postal Code _____

Country _____

Email address _____

Membership # _____ Age: _____

Applicant Signature

Date

Submission Instructions:

Please submit an electronic copy of this application form, a copy of your abstract, and CV to office@worldburn.org.
Please use the subject title "Young Investigator Award".

Complete applications must be submitted when your abstract has been submitted.