**Organ-On-A-Chip Technologies Network  
Event Funding Support Application**

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| **Event Lead / Chair (main contact person)** | | | | | | |
| Title: |  | First name: | |  | Surname: |  |
| Email: |  | | | | | |
| Division / Department: | | |  | | | |
| Organisation | | |  | | | |

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| **Event Committee Member** | | | | | | |
| Title: |  | First name: | |  | Surname: |  |
| Email: |  | | | | | |
| Division / Department: | | |  | | | |
| Organisation | | |  | | | |

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| **Event Committee Member** (Additional if any) | | | | | | |
| Title: |  | First name: | |  | Surname: |  |
| Email: |  | | | | | |
| Division / Department: | | |  | | | |
| Organisation | | |  | | | |

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| **Event Details** | | | | |
| Title: |  | | | |
| Dates: |  | | | |
| Location: |  | | | |
| Website: |  | | | |
| Expected Attendance: | |  | Attendance max (if any) |  |
| Standalone event or part of larger conference (give details) | |  | | |
| Event open to all or invite only | |  | | |

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| **Budget** | |
| Funding requested: |  |
| Please attach an outline budget for the event, including breakdown on income and expenditure and any other sponsorship sought / acquired | |

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| **Aims and goals of event** |
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| **Outline programme** |
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