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| Macintosh HD:private:var:folders:vw:l7159gws3595qbn81b7mm06c0000gp:T:TemporaryItems:ALHHS_Logo.png | **Archivists and Librarians in the History of the Health Sciences**  **Joan E. Klein Travel Scholarship**  The ALHHS offers two annual conference travel stipends to ALHHS or MeMA members who are students or early career professionals. The purpose of this award is to encourage and support continued education and professional engagement for students and early career professionals working in the history of the health sciences, particularly, in libraries, archives, or museums. |

**Application**

* This award is open to students who are degree-seeking individuals attending an accredited college or university and to early career professionals working in the history of the health sciences, particularly, in libraries, archives, or museums. Early career professionals are those who have worked in the history of the health sciences field fewer than five years.
* Applicants should submit a brief personal statement (no more than 500 words) which highlights their interest in the conference, how attendance will benefit them, and why they need financial support.
* Applicants should submit along with their application a letter of recommendation from either their academic advisor (students) or immediate supervisor (early career professionals). These letters should be sent by the applicant *with the application*. Incomplete applications will not be considered.
* Applications must be received 8 weeks before the opening session of the conference. **The deadline for the 2019 Annual Meeting is February 27th, 2019.** Late applications will not be considered.
* All applicants will be notified of the scholarship committee decision 6 weeks prior to the start of the conference. **This is March 13th, 2019.** Award checks will be presented at the conference business meeting.
* Each stipend will be in the amount of $500.
* Previous winners are not eligible to apply.
* The ALHHS Travel Scholarship Committee reserves the right not to award a travel stipend in any particular year.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a first-time attendee to the ALHHS Conference? YES NO

Applicant status (select one): STUDENT EARLY CAREER PROFESSIONAL

FOR STUDENTS:

Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree sought: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Proposed graduation date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

FOR EARLY CAREER PROFESSIONALS:

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start Date (M/Y): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your signature at the bottom of this application indicates that the information above is correct.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit this application, your personal statement, and letter of recommendation to Committee Chair, Keith Mages by email to [kcm2001@med.cornell.edu](mailto:kcm2001@med.cornell.edu) or to the Samuel J. Wood Medical Library, Weill Cornell Medical College, 1300 York Ave, Suite D-120, New York, NY 10065.