



INTERNATIONAL CANCER FOUNDATION

Bridging the global divide in cancer care

This application form is for individuals seeking travel support to attend ESMO Congresses and events under the ICF Travel Grant Support Program. Please ensure that you have read the full guidelines before completing this form. All information will be treated as confidential.

1. Personal Information

Full Name: _____

Email Address: _____

Phone Number: _____

Country of Residence: _____

Affiliation / Organization: _____

Position / Role: _____

2. ESMO Event Information

Event Name: _____

Event Date(s): _____

Location: _____

Applying for : ☐ Travel costs ☐ Accommodation costs ☐ Registration fees

Total expenses expected:

Total requested Amount (EUR): _____

Please describe briefly the estimated travel and accommodation costs:

3. Motivation

Please explain your motivation to attend the event describing:

- Why you wish to attend this event
- How it aligns with your advocacy or professional goals
- How it will contribute to your work and impact in cancer care and control

You may precise if you have received funding from other organizations or agencies.

4. Funding Request

Have you previously received an ICF travel grant? ☐ Yes ☐ No

If yes, please indicate the year and event: _____

5. Commitment

If selected, I commit to attending the full event in person, confirming my attendance by the deadline, and providing a post-congress testimonial if requested.

Signature: _____ Date: _____

6. Additional Information (Optional)

Please include any additional details, recommendations, or documents that support your application.