

## **BROADENING THE RESEARCH AND KNOWLEDGE EXCHANGE OF CLINICAL NEUROPHYSIOLOGY**

One benefit of IFCN membership is the opportunity to apply for the Visiting Professor Program, which is open to all IFCN Societies and ICNS members. The goal of the Program is to widen clinical and scientific knowledge. To that end, the IFCN Executive Committee (ExCo) is looking to support Visiting Professors who would participate by conducting lectures, workshops, or other practical activities, including organized meetings with trainees. Single lectures would not be sufficient. The visit should last long enough to accomplish the objectives without exceeding four (4) days.

Proposals should include specific topics of interest, the expected number of participants warranting this effort, any useful information considered relevant, the society hosting the meeting, and details of why this expertise is not available locally. *Requests from countries where clinical neurophysiology is developing will have preference.* In case of a request for a topic without naming a specific person, the ExCo will assign a Visiting Professor. When a request for a specific Visiting Professor is proposed, the ExCo will evaluate the request and may suggest alternative persons instead. The ExCo wishes to keep visiting professors geographically close to the society making the request, both to encourage local collaboration and to minimize travel expenses.

Funding by IFCN should be recognized on the host organization's web site and in on-site program materials.

**A. Meeting Location and Host Society Name:**

**B. Visiting Professor Needs:**

Please provide a 350-word description of the type of expertise needed to accomplish the desired outcomes:

Please state if you have a recommendation for a specific candidate who meets these requirements:

1. Candidate's Name:
2. Area of expertise
3. Institution where employed:
4. Email address:

The ExCo will review these recommendations and determine if there may be other candidates available who can fulfill these requirements and who are geographically closer.

**C. Activity:**

1. Date:
2. Anticipated Number of Attendees:
3. Will attendees be charged a registration fee? If yes, how much?
4. Description of activity:
5. Measurement of outcome:

**D. Budget Estimates (500-750 words):**

Please estimate to the best of your ability the associated expenses of the Visiting Professor's trip.

1. Transportation Expense:
2. Lodging Expense:
3. Food and Beverage Expense:
4. Other (please be specific):

Please note that the IFCN does NOT provide funding for equipment, computers or laboratory renovations.

**E. Social Media Opportunities:**

Please indicate willingness to post related social media content for the IFCN.

yes  no

Please indicate willingness to have session(s) recorded.

yes  no

The recordings will be distributed via the IFCN website and social media. The IFCN will incur the expenses associated with the recording process.

**Please include the following with the completed application:**

1. Current curriculum vitae (CV) or resumé of the recommended expert
2. Additional supporting information, including event budget if available

If necessary, please use a separate document to provide all requested information.

Society members will be awarded support a maximum of one time in a four-year period.

Please submit your request at least **60 days** in advance of funding needed. Send the completed Visiting Professor Program Application to [info@ifcn.info](mailto:info@ifcn.info).