

# APHRS Congress Travel Grants 2025

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The APHRS Congress Travel Grants 2025 is introduced to facilitate the participation of early-career heart rhythm professionals in the [18<sup>th</sup> APHRS Scientific Session, APHRS 2025](#), taking place from 12-15 November in Yokohama, Japan. Each grant recipient will receive a travel stipend of US\$ 500 and complimentary registration to attend the congress.

## Eligibility

- You must be a member of APHRS. Not a member yet? [Join us now](#).
- You will be attending APHRS 2025 Yokohama onsite.
- You are either a:
  - (a) Medical / Post Doctorate Student;
  - (b) Resident / Fellow in Training;
  - (c) Physician (with no more than 3 years after fellowship); or
  - (d) Allied Professional (Nurse / Cardiac Technologist).
- Priority will be given to:
  - (a) Applicants from APHRS Member Countries;
  - (b) Abstract presenters at the APHRS 2025 Yokohama;
  - (c) Applicants who live and work in countries that are categorised as the [World Bank](#) Low Income or Lower Middle Income; and
  - (d) Applicants who have not previously received any support from APHRS.

## Application Timeline

Application Deadline: **31<sup>st</sup> August 2025, 11:59pm, Singapore Standard Time.**

Grant recipients will be selected and notified by early September 2025.

## How to Apply?

Kindly complete the application form and send it back together with all the required documents (please merge all documents into a single PDF file) to [apply@aphrs.org](mailto:apply@aphrs.org).

## APHRS Congress Travel Grants 2025

### Application Form

<b>Salutation</b>			
<b>First Name</b>		<b>Last Name</b>	
<b>Gender</b>		<b>Date of Birth</b>	
<b>Nationality</b>		<b>Country of Residence</b>	
<b>Home Address</b>			
<b>Phone Number</b>			
<b>Email</b>			
<b>Hospital / Institution</b>			
<b>Occupation / Position</b>			
<b>APHRS Member ID</b>			

**Please select the application category that best describes you.**

<input type="checkbox"/>	Medical / Post Doctorate Student
<input type="checkbox"/>	Resident / Fellow in Training
<input type="checkbox"/>	Physician (with no more than 3 years after fellowship)
<input type="checkbox"/>	Allied Professional (Nurse / Cardiac Technologist)

**Has your abstract been accepted for presentation at APHRS 2025 Yokohama?**

<input type="checkbox"/>	Yes. Abstract Reference Number: _____ Presentation Type: _____
<input type="checkbox"/>	No

**Have you obtained funding from APHRS in the past?**

<input type="checkbox"/>	Yes. Please specify: _____
<input type="checkbox"/>	No

## Declaration

<input type="checkbox"/>	I confirm that I do not have any other sources of support to attend the congress.
<input type="checkbox"/>	I give my consent to APHRS, to collect, use and process my personal information.
<input type="checkbox"/>	I certify that all the information provided in this application is accurate, that all supporting documents are relevant and legitimate.
<input type="checkbox"/>	<p>I confirm that I have read and understood the following:</p> <p><b><u>Important Notes:</u></b></p> <ul style="list-style-type: none"> <li>• Grant recipients will be personally responsible for all travel arrangements.</li> <li>• Reimbursement of the travel stipend will be made via bank transfer only after the congress.</li> <li>• Grant recipients will need to sign daily attendance at the APHRS booth.</li> <li>• The travel stipend will not be reimbursed in the event of a no-show at the congress, regardless of the reason.</li> <li>• Applicants or recipients who later receive support from other sources must promptly inform APHRS.</li> </ul>
	<p>Applicant's Signature: _____ Date: _____</p>

## Application Requirements:

Please **MERGE** the completed application form and all the required documents into a single PDF file before sending it back to [apply@aphrs.org](mailto:apply@aphrs.org).

Late or incomplete applications will not be entertained.

## \*Required Documents:

- Resume/CV
- Proof of Citizenship (Copy of passport identity page)
- Proof of Current Employment