



International Association for the Study of Lung Cancer (IASLC)

Application Form for IASLC Sponsorship/Endorsement of Workshops and Other Educational Events

**NOTE: Please completely fill out the questionnaire as indicated (see page 2).
Incomplete applications will be returned without review.**

Please e-mail completed form to: pia.hirsch@iaslc.org

IASLC Workshop Guidelines

The IASLC endorses workshops that focus on thoracic malignancies. Applicants must complete the appropriate application form and provide the required materials as detailed in each form. **Incomplete applications will be returned without review.** Applicants may request either IASLC endorsement alone (i.e., use of the IASLC logo in meeting materials and a commitment to promote the IASLC before and during the educational event) or IASLC financial support in addition to endorsement.

Applicants must submit the completed application form and required materials **at least 3 months** before the date of the educational activity. Application forms are provided below.

The IASLC Education Committee reviews all workshop applications. Review criteria - as required by the IASLC Board of Directors - include the following: emphasis on thoracic oncology, scientific merit, appropriateness of the planning committee or group, adequacy of the proposed agenda/programme, and promotion of the IASLC. The proposed agenda should clearly indicate the topic and proposed lecture title even if a definite speaker has not yet been confirmed (a proposed speaker can be included). Dependent on the proposed educational activity, the following criteria may also apply: multidisciplinary nature of the event and provision of tobacco/smoking cessation as a program element. **For applicants requesting financial support, a clear justification is necessary for why funding from the IASLC is being requested.**

In addition, the application must identify a liaison (preferably an IASLC member) who will be responsible for all interactions with the IASLC and for the submission of a mandatory Post-Meeting Summary Form **no more than eight weeks** after the end of the educational event. This Post-Meeting Form is provided below.

Following review, the Education Committee will recommend either **“Approval”, “Provisional Approval”, or “Disapproval”**.

Provisional approval will only be granted for those applications that have 1) met all essential elements other than confirming the program speakers or final lecture titles and 2) involve recurring workshops that have been previously endorsed by the IASLC in each of the three preceding years. A final agenda for the provisionally approved program will still be required prior to receipt of full approval status. **This final agenda must be submitted for Education Committee chair review at least 6 weeks before the date of the educational activity.** Provisional approval allows the applicant use of the IASLC logo in its promotional and meeting materials. Failure to receive full approval may jeopardize current and future IASLC endorsement of the recurring workshop.

Applications that are **disapproved** can be appealed or resubmitted; however, a consultation with the Education Committee is strongly recommended prior to resubmission. This will allow the applicant to incorporate recommended changes into the program that meet minimum criteria for review.



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NAME OF EVENT: _____

Proposed Date(s):	Location:	City:	Country:
Organizing Group(s):			
Local Organizing Committee: (Please identify the IASLC members and indicate the IASLC Liaison for this committee. This individual must be an IASLC member.)			
Name		IASLC member?	
Chair:		Yes	No
Members:		Yes	No
		Yes	No
Contact Information:			
Contact Name:			
Address:			
Phone and Fax:			
E-mail:			

FORMAT OF EVENT: What will be the form of the Educational Event (please mark):

- Workshop
- Conference
- Symposium
- Other (*specify*):

SECTION I

(If additional space is needed, please use and attach additional pages.)

1. Does this educational event have a prior history?

YES, this is a regularly occurring event

NO, this is a one-time event

No, this is the inaugural event for what will be a regularly occurring meeting

2. List the overall goal and the specific objectives of your educational event and identify the 2-3 major learning objectives.

Overall goal:

Specific objectives:

1.

2.

3.

Learning objectives: Upon completion of the event, the attendants are expected to:

a.

b.

c.

3. How many participants are expected?

Less than 100

100 – 300

301 - 499

500 - 1,000

More than 1,000

4. Who is the target audience?

Medical oncologists

Surgical oncologists or thoracic surgeons

Radiation oncologists

Pulmonologists

Pathologists

Nurses, pharmacists, and similar health-care related specialists

Other

5. Provide an agenda or outline of the program, including invited, confirmed, or planned speakers. Identify all invited speakers that are IASLC members.

Speaker Name:	IASLC member?	
_____	Yes	No
_____	Yes	No
_____	Yes	No

6. How will the IASLC be recognized at the meeting?

- Flyers to be included with the conference materials and/or tote bag
- Slides to be projected at the start and end of each session
- IASLC logo will be prominently placed near the entrance of the meeting
- Advertisements for the meeting will prominently display IASLC logo
- Prominent IASLC placement in event website and e-mails
- Other (please specify): _____

7. IASLC members will be offered a discounted registration fee (of at least 20% off the published rate).

YES No

8. Will there be abstracts or educational articles from the event?

Yes No

9. Do you plan to have a Supplement for the Journal of Thoracic Oncology (JTO) or you want to have the abstracts published in JTO?

Yes No

10. Does the IASLC liaison agree to

A. Guarantee that IASLC is properly recognized and promoted at the meeting?

Yes, this confirms the above statement No

B. Provide a report including post-meeting evaluations to the IASLC within 8 weeks of completion of the educational event?

Yes, this confirms the above statement No

SECTION II: Only for applicants requesting financial assistance from the IASLC

11. State the amount of financial support requested from IASLC.

12. Provide specific details on the use of financial support from the IASLC.*

*It is not IALSC policy to fund surpluses. If the conference makes a surplus, we request excess funds be returned.

13. Indicate the funding source(s) of the educational event (indicate all that apply):

Pharmaceutical companies

Please specify: _____

Unrestricted educational grants

Please specify: _____

Philanthropic contributions

Please specify: _____

Government or state funding

Please specify: _____

Other

Please specify: _____

18. Provide an overview of the budget breakdown (revenue & expenses) for the planned educational event:

Revenue:

Expenses:

19. We request that any excesses of funds be returned. Please indicate when the final conference results are anticipated and who will do the final accounting.

Please provide name, email address and phone number. Please return a final financial report and any surpluses to:

Pia Hirsch

13100 E. Colfax Ave. Unit 10

Aurora, CO 80011