

PENAUNG DIRAJA

DYMM Sultan Sharafuddin Idris Shah Alhaj
Ibni Almarhum Sultan Salahuddin Abdul Aziz Shah Alhaj
Sultan Selangor



YAYASAN
PARU-PARU
MALAYSIA

AHLI LEMBAGA AMANAH

Pengerusi

Dato' Dr. Zainudin bin Md. Zin

Ahli-Ahli

Tan Sri Dato' Seri Arshad bin Ayub

Tan Sri Datuk Dr Ampikaipakan
a/l S. Kandiah

Dato' Dr. Azizi bin Omar

Datuk Dr. Aziah bt Ahmad Mahayiddin

Professor Dr. Liam Chong Kin

Dr. Norzila bt Mohamed Zainudin

Assoc. Professor Dr. Jessie de Bruyne

Professor Dr. Roslina Ab. Manap

LUNG FOUNDATION OF MALAYSIA (LFM) RESEARCH GRANT

The Lung Foundation of Malaysia is pleased to invite applicants to apply for LFM Research Grant for the year 2015. The application is open to Malaysians and non-Malaysians who reside and work in Malaysia. The research can be in any field of respiratory medicine; clinical, epidemiological or basic science. The priority will be given to research with the potential of enhancing knowledge/understanding of disease or that which can impact practice or care of patient. The total amount of the grant is RM100,000.00 (Ringgit Malaysia Hundred Thousand) which may be given to one or more recipients.

To qualify for the grant, the applicants must submit the application form and research proposals complete with the title, background, objective/s, methodology and the estimated cost and the duration of the study. The application form and the proposal must reach the LFM office on or before 29th May 2015. The application can also be submitted by e-mail to lungfoundation@gmail.com. Successful applicant/s is/are required to execute Letter of Undertaking to carry out the research with the Terms and Conditions thereto.

Please send your application (form attached) together with the research proposal to:

Lung Foundation of Malaysia,
Office Suite 2-3, 2nd Floor,
Medical Academies of Malaysia,
210, Jalan Tun Razak,
50400, Kuala Lumpur.
Te/Fax : 03 2856 9539

Lung Foundation of Malaysia
Office Suite 2-3, 2nd Floor
Medical Academies of Malaysia
210, Jalan Tun Razak
50400 Kuala Lumpur
Tel/Fax : 03 4025 2700

LFM RESEARCH GRANT APPLICATION FORM

1. Name:

2. Position/Designation:

3. Office Address :

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4. Tel :

5. Email :

6. Title of Research Project:

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7. Abstract/Brief Description of the Research Project:

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8. Amount of Fund Required & Duration of Project:

9. Number of Personnel Involved:

Signature :

Date :