

# FMIG 2016 National Conference Informational Meeting

## Submission Form

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### INSTRUCTIONS

Please complete the following to be eligible to receive funds from the AAFP for your FMIG-hosted National Conference informational meeting. Submit this form and the attendee list to the AAFP at the address below.

\*FMIG name: \_\_\_\_\_

Medical school: \_\_\_\_\_

Regional Campus (if applicable): \_\_\_\_\_

FMIG student leader primary contact:  
\_\_\_\_\_

FMIG student leader primary contact email address:  
\_\_\_\_\_

FMIG faculty advisor primary contact:  
\_\_\_\_\_

FMIG faculty advisor primary contact email address:  
\_\_\_\_\_

FMIG faculty advisor signature:  
\_\_\_\_\_

I verify that all funds provided by the AAFP will be used as reimbursement for the FMIG-hosted 2016 National Conference informational meeting.

Make check payable to:  
\_\_\_\_\_

Tax Identification Number: \_\_\_\_\_

Mail check to:  
\_\_\_\_\_  
\_\_\_\_\_

**To be eligible for \$100, all eligibility criteria must be fulfilled. Please check all completed criteria.**

- \*\*Recognized as an established student interest group by an LCME accredited medical school.
- Presented the AAFP National Conference powerpoint presentation at an FMIG meeting before April 29, 2016.
- Submitted a copy of attendees to the AAFP.
- Signed submission form submitted to the AAFP no later than **May 9, 2016**.

**\* WWAMI Region — Please specify state.**

**\*\* Family Medicine Interest Groups at accredited Osteopathic and Canadian medical schools are NOT eligible to apply.**

**Other questions, please contact Sam Carlson at [ncpromo@aafp.org](mailto:ncpromo@aafp.org).**



AMERICAN ACADEMY OF  
FAMILY PHYSICIANS

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