

Application for Funding

AAFP & AAFP Foundation FMIG Network Funding Initiative

fmigfunding@aafp.org

INSTRUCTIONS

Please complete the following to apply for grant funds from the AAFP & AAFP Foundation FMIG Network Funding Initiative. **Mail all application materials in one envelope to the address at the bottom of this form. Please do not submit via email or fax.**

*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:

Make check payable to:

**Tax Identification Number: _____

Mail check to:

To be eligible for \$600, the following criteria must be fulfilled by December 10, 2018, using the application materials and surveys provided at aafp.org/fmigfunding. Please check all completed criteria.

- ***Recognized as an established student interest group by an LCME-accredited medical school.
- Completed the campus FMIG activity survey at <https://www.surveygizmo.com/s3/4480734/FMIG-Activity-Survey-2018>.
- Presented at least one program or completed a project addressing at least one of the following. Check all that apply:
 - What is family medicine?
 - Innovations in family medicine (e.g., PCMH)
 - Project serving community need or addressing advocacy
- Submitted required program evaluation summary form.
- Submitted participant evaluations for one of the above-listed programs or projects.
- Application signed by your AAFP state or constituency chapter before submitting to the AAFP Medical Education Division. For a list of chapter contacts, see <https://nf.aafp.org/MyAcademy/contactmychapter/Index/ChapterDirectory>.

TO BE COMPLETED BY YOUR STATE OR CONSTITUENCY CHAPTER.

AAFP Chapter contact:

Email address:

- I verify that all funds provided by this grant will be used to provide financial support to the above named family medicine interest group.

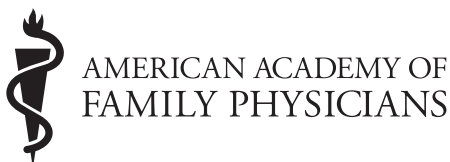
AAFP Chapter staff signature

** WWAMI Region — Please specify state.*

*** For more information, visit aafp.org/fmigfunding*

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

Other questions, please contact Mary Harwerth at fmigfunding@aafp.org.



Mail completed application materials to:

American Academy of Family Physicians
Medical Education Division
Attn: Mary Harwerth
11400 Tomahawk Creek Parkway
Leawood, KS 66211-2680

