

UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE JACKSONVILLE
Office of Educational Affairs

Approval Date: 12/4/2018	Subject: DEAN'S FUND RESEARCH TRAVEL AWARD	Page 1 of 1
Approved by: GMEC		Revised Date: 5/10/2016; 11/1/2018; 5/20/19
Effective Date: 7/1/2003		Reviewed Date: 5/10/2016; 11/1/2018; 5/7/2019

1. **Purpose:** The Research Travel Award is intended to provide supplemental funding for residents/fellows to present the results of their research projects at national or international conferences.
2. **Eligibility:** All University of Florida Health College of Medicine Jacksonville Residents/Fellows whose abstract(s) has/have been accepted for presentation at a major national or international conference are eligible to apply.
3. **Funding Amount:** A request may be made for up to \$500.00 per person, with no more than \$1000.00 per program per academic year. The number and amount of awards will depend upon available funds and the number of qualified applications. Applicants must indicate the minimum support level needed to attend the conference and identify all other funding sources (e.g., Attending Staff Foundation grant, or the residency/fellowship program GME).
4. **Review and Approval Process:** The Senior Associate Dean for Educational Affairs will review the packet materials as necessary, with designated faculty included in the review process, if needed. All applicants will receive confirmation of the funding amount via e-mail.
5. **Award Process:** The Office of Educational Affairs will submit a transfer request to have the award amount deposited into the program's GME account. The program director and program coordinator will receive a copy of the transfer request.
6. **Research Day:** All awardees are expected to submit their research project for presentation at the annual Research Day at the University of Florida College of Medicine - Jacksonville.
7. **Application Packet Requirements:**
 - Letter of acceptance for research presentation at a national or international meeting
 - A copy of the accepted abstract

DEAN'S FUND RESEARCH TRAVEL AWARD PACKET COVERSHEET

Application packet must contain:

- Letter of acceptance for research presentation at a national or international meeting
- A copy of the accepted abstract

Name: _____ Program: _____ Contact: _____
Resident/Fellow Name Pager Number

Disciplinary action or remediation plan on file: YES NO

If yes, type(s) and date(s) within the last 6 months: _____

Conference: _____ Location: _____

Dates: _____

Total Travel Cost: _____

DIO REVIEW:

Approved Amount: _____ **Denied** Reason: _____

Date: _____

Linda R. Edwards, M.D.
Designated Institutional Official



TRANSFER OF FUNDS REQUEST

To: Tim Reinschmidt

From: Leslie Caulder

RE: Transfer of Funds Request

Please transfer \$ _____ from the GME Account 71999 into GME Account # _____. The transfer is a Dean's Travel Award for the resident's presentation at the meeting listed above. The award amount and approval are shown.

Please contact me if you have any questions. Thank you.

Attachment:

Abstract acceptance notice and copy of abstract