| LogoFINAL2tm Wichita Medical Research & Education foundation 3306 E Central, Wichita, Ks 67208  316-686-7172 316-687-0033 (fax)  **Application for Continuing Education Funding**  **Please submit electronically to**  [**scholarship@wichitamedicalresearch.org**](mailto:scholarship@wichitamedicalresearch.org) | | | | |
| --- | --- | --- | --- | --- |
| Applicant Information | | | | |
| Last Name: First Name: | | | | |
| Day Phone: | Cell Phone: | | |  |
| Current address: | | | | |
| City: | State: | | | ZIP Code: |
| Are you a past awardee and this is a new address? | □ Yes □ No | | |  |
| Previous address: | | | | |
| City: | State: | | | ZIP Code: |
| Employment Information | | | | |
| Current employer: Department: | | | | |
| Employer address: | | | |  |
| City: | State: | | |  |
| Position or Job Title: | | | | |
| Conference Name | | | | |
| #CEUs to be awarded | | | |  |
| Conference Location – City | |  | | Conference Date: |
| Conference Registration Fee:  Estimated Travel Expenses: Meals/Food Funding from other sources:  Airfare/Mileage Other Describe:  Hotel Total Request: | | | | |
| Email Address: | | | |  |
| Professional Category: □ Nurse: □ Therapist □ Pharmacist □ Other | | | | |
| Specify if other: | | | | |
| A scanned or electronic copy of the brochure must accompany this application | | | | |
| Certification and Degree Classes are Not Eligible for Funding. | | | | |
| Please describe the impact on direct patient care you expect to derive from this conference: | | | | |
| How do you plan to disseminate the new information or skills learned during this training: | | | | |
| Signature of Applicant | | | | Date |
| Printed Name of Supervisor - Required | | | Phone: Email | |
| Signature of Supervisor: Date: | | | | |
| I have attached: □Copy of the Conference Brochure □ Supervisor’s Signature and email | | | | |
| For Office use only – Please do not write in this space | | | | |
| □ WMREF Ancillary □Zona Richardson □Education Fund # □ Other | | | | |
| Date Received EGC Approval Board Approval Letter Ck# | | | | |