

# OTIS Scholarship Guidelines for ENTIS New Trainee for the 2019 OTIS Annual Meeting

### Deadline for application: Wednesday, April 10th, 2019

**ENTIS New Trainee Scholarship:** includes \$500.00 towards travel expenses to be given to an **ENTIS Member in good standing as of February 15<sup>th</sup>, 2019** and who is in at least one of the following two groups:

- Presents an abstract that has been accepted for presentation at the meeting; OR
- Presents a poster that has been accepted for presentation at the meeting.

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#### **Guidelines**

- Scholarships are intended to provide supplementation, not full reimbursement, for ENTIS New Trainees that might have financial challenges in attending the Annual Meeting.
- ENTIS Members receiving a scholarship must be a current ENTIS Member.
- Scholarships may not be awarded to ENTIS members that are receiving other travel reimbursements from OTIS or ENTIS such as reimbursements offered to OTIS Research Coordinators, OTIS Committee Chairs and Speakers.
- Only one scholarship awarded per person.
- Scholarships are for reimbursement of travel expenses (accommodation, transportation and food & beverage) to attend the Annual Meeting, based on submitted receipts using the OTIS expense form.
- Reimbursements will not be paid prior to submitting expenses following the Annual Meeting.

The scholarship recipients will be selected by a committee that includes the OTIS Treasurer and President. If there is a conflict of interest, an alternative member will be selected.



## **OTIS Scholarship Request Form for ENTIS New Trainee**

Please fill out the following information and return your scholarship request to the OTIS National Office.

## The deadline for applying for a scholarship is April 10<sup>th</sup>, 2019 Scholarship winners will be notified on April 24<sup>th</sup>, 2019

| First Name                                                                                                                                                                                                  |      | Last Na        | ame                 |            |  |
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| TIS affilia                                                                                                                                                                                                 | tion |                |                     |            |  |
| Address                                                                                                                                                                                                     |      |                |                     |            |  |
| City                                                                                                                                                                                                        |      | State/Province | Zip/Postal code     | Country    |  |
| Phone                                                                                                                                                                                                       | Fax  |                | email               |            |  |
| Are you an invited speaker at the OTIS meeting?                                                                                                                                                             |      |                |                     | ☐ Yes ☐ No |  |
| Are you presenting an abstract at the OTIS meeting?                                                                                                                                                         |      |                | ☐ Yes ☐ No          |            |  |
| Are you presenting a <b>poster</b> at the OTIS meeting?                                                                                                                                                     |      |                |                     | ☐ Yes ☐ No |  |
| Are you receiving any other funds from OTIS or ENTIS to attend this meeting                                                                                                                                 |      |                | attend this meeting | ☐ Yes ☐ No |  |
| ADDITIONAL REQUIREMENT                                                                                                                                                                                      |      |                |                     |            |  |
| On the following sheet of paper, please answer the following questions:                                                                                                                                     |      |                |                     |            |  |
| <ol> <li>Tell us about yourself including your professional background.</li> <li>Why are you a deserving scholarship candidate and how does your presence contribute to the OTIS annual meeting?</li> </ol> |      |                |                     |            |  |

Please submit your application via PDF or Word document to <a href="mailto:ewasternack@parthenonmgmt.com">ewasternack@parthenonmgmt.com</a>

#### For questions, please contact:

OTIS National Office 5034A Thoroughbred Lane Brentwood, TN 37027 phone: 615-649-3082

contactus@mothertobaby.org

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| NAME:                                                                                                                                                                                                       |  |  |  |  |
| <ol> <li>Tell us about yourself including your professional background.</li> <li>Why are you a deserving scholarship candidate and how does your presence contribute to the OTIS annual meeting?</li> </ol> |  |  |  |  |
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| REVIEW COMMITTEE ONLY:                                                                                                                                                                                      |  |  |  |  |