

Alumni Association Professional Development (POD) Grant Application Form

The applicant must be a current student from the Drexel University College of Medicine or the Graduate School of Biomedical Sciences and Professional Studies.

* **P**r**o**fessional **D**evelopment (POD) grants include two levels of funding: Academic Tier 1 and Experiential Tier 2.

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| Academic Tier 1 | Experiential Tier 2 |
| Poster and oral presentations: up to $500 | Up to $250 |

* Academic Tier 1 grants are appropriate for individuals planning to **present** at a recognized medical or scientific conference or a national medical society meeting. Poster and oral presentations are eligible for up to $500 in grant funding.
* An individual may apply for ***up to two*** Academic Tier 1 grants per academic year for presenting at two *different* medical or scientific conferences. First-time applicants will be prioritized ahead of repeat applicants. The board may invite funded grantees to give an oral presentation at a board meeting and/or may request that the grantee share their conference abstract, poster or presentation with the board.
* Experiential Tier 2 grants are appropriate for individuals planning to further their professional experience, such as offsetting costs when doing a summer research project.
* An individual may apply for ***one*** experiential grant per academic year and must be able to demonstrate how this experience will enhance experience in their field of study.
* When completing your funding request form, please ensure you are able to articulate the value of the funding and why receiving funding from the Alumni Association will help to support your development.
* The DUCOM Alumni Association’s support should, conference deadlines permitting, be acknowledged in printed materials (e.g., posters), presentation slides and in oral communications for those presenting at a conference/meeting.
* A budget outlining estimated or actual costs must be submitted with the application.
* A letter of support written by a faculty-level professional who knows you in a professional context and is familiar with your research must be submitted with the application

For All POD Applicants (Tier1 & Tier2):

**Grant Application Title:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date of submission must precede the starting date of the event or conference

**Applicant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Funding Amount Requested** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*For criteria and funding information please visit:* drexel.edu/medicine/StudentOrgGrants

**Project Description**: Provide the name, dates and location of the conference/meeting you will be attending. All applicants **must submit a budget** outlining actual or estimated expenses as justification for the funding amount requested. Applications without budget information will not be considered.

For applicants requesting funding to present at a conference or society meeting (Academic Tier 1):

You need to:

(1) Submit a description of your research project/planned presentation

(2) Identify your faculty or staff sponsor

(3) Provide a letter of support from your faculty/staff sponsor

(4) Submit a budget of actual or estimated expenses

**(1) Project Description**: Please provide an overview of your research project, what you plan to present, and in what format (poster, talk, etc.). **Please do not copy and paste your abstract here.** We are looking for a narrative about your research and an explanation of why receiving funding from the Alumni Association will help to support your development.

**(2) Faculty/Staff Sponsor** (name and email): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The sponsor should be a faculty-level professional who knows you in a professional context and is familiar with your research. The sponsor does not have to be Drexel faculty member. Family members should not write letters of support for any Alumni Association grantee.

**(3) Letter of Support**: Please ask the faculty/staff sponsor named above to submit a letter of support on letterhead to medical.alumni@drexel.edu with the funding proposal title listed.

Submit your completed application by email: medical.alumni@drexel.edu. After receiving this form, the Alumni Association may ask for additional information, including a more detailed narrative and budget.

For applicants requesting Experiential Tier 2 funding:

You need to:

(1) Submit a description of your research project

(2) Identify your faculty or staff sponsor

(3) Provide a letter of support from your faculty/staff sponsor

(4) Submit a budget outlining how this grant will offset your costs

**(1) Project Description**: Please provide an overview of your research project.

**(2) Faculty/Staff Sponsor** (name and email): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The sponsor should be a faculty-level professional who knows you in a professional context and is familiar with your research. The sponsor does not have to be Drexel faculty member. Family members should not write letters of support for any Alumni Association grantee.

**(3) Letter of Support**: Please ask the faculty/staff sponsor named above to submit a letter of support on letterhead to medical.alumni@drexel.edu with the funding proposal title listed.

Submit your completed application by email: medical.alumni@drexel.edu. After receiving this form, the Alumni Association may ask for additional information, including a more detailed narrative and budget.