**ISPOR Student Chapter Activity Grant Application**

**APPLICATION REQUIREMENTS & OVERVIEW:** (Please read this before completing the application on the third page)

1. An application should be submitted for each event separately, even if multiple applications are being submitted for a single deadline
2. Contact information for university chapter, including Student Chapter President and Faculty Advisor
3. Check box for whether this is a re-submission or new application.
4. Check box for whether chapter has received funds in the given year. If so, provide date and amount received.
5. Clear description of the objective of the activity. How does this align with the ISPOR mission?
   * 150 words or less.
6. Clear description of the type of event and format for the event
   * 150 words or less.
   * Attach tentative agenda or any other supporting materials (i.e. flyers, presentation slides, handouts).
7. Anticipated number of attendees
8. Amount requested and itemized budget for activity costs
9. Signature of Student Chapter President and Faculty Advisor.

|  |  |
| --- | --- |
| **Scoring Criteria** | **Point Allocation** |
| **Is application complete? (points will be deducted for incomplete or nonqualifying events)** | **Max 5 points** |
| **Relevance of the event to ISPOR (does it align with ISPOR mission? Is it appropriate and worthy of funds?)** | **1 strongly disagree**  **2 disagree**  **3 neither agree or disagree**  **4 agree**  **5 strongly agree** |
| **Detail information that was provided on the application (is the activity clear to understand and feasible?)** | **1 strongly disagree**  **2 disagree**  **3 neither agree or disagree**  **4 agree**  **5 strongly agree** |
| **Limitations of the chapter to hold event without funds** | **Max 5 points** |
| **Cost-effectiveness - costs for impact/number attendees** | **1 strongly disagree**  **2 disagree**  **3 neither agree or disagree**  **4 agree**  **5 strongly agree** |
| **TOTAL** | **25 points** |

**PROCESS:**

1. Applicants will usually have 1 months to submit an application for the following activity period.
2. Once the application closes, the grant committee will have one month to distribute applications amongst committee members and score each application (as explained above).
   1. Each application should be scored by at least 2 committee members
   2. Final decisions will be made by the committee co-chairs.
3. Chapters will then be notified of a decision no later than the above “Chapter Notification” date and will then be able to start their activity in the following activity period.
4. If an event is not funded in a specific round, the chapter can submit the exact same event for the next round, but are strongly encouraged to improve on what was previously submitted.
5. Funds will be reimbursed after each event separately:
   1. Expense Reimbursement will be done via emailing all receipts and an activity report (for inclusion in the newsletter) for the event funded to studentnetwork@ispor.org no later than 30 days after the event completion date.
   2. Failure to meet this deadline might result in expenses not being reimbursed.

|  |  |  |  |
| --- | --- | --- | --- |
| **Application Open** | **Application Deadline** | **Chapters Notified** | **Activity Period** |
| Apr. 15, 2019\* | May 1, 2019 | June 1, 2019 | July – Sept. ‘19 |
| July 1, 2019 | Aug. 1, 2019 | Sept. 1, 2019 | Oct. – Dec. ‘19 |
| Oct. 1, 2019 | Nov. 1, 2019 | Dec. 1, 2019 | Jan. – Mar. ‘20 |
| Jan. 1, 2020 | Feb. 1, 2020 | Mar. 1, 2020 | Apr. – June ‘20 |
| Apr. 1, 2020 | May 1, 2020 | June 1, 2020 | July – Sept. ‘20 |
| July 1, 2020 | Aug. 1, 2020 | Sept. 1, 2020 | Oct. – Dec. ‘20 |

\*The application period for this round of funding is abridged but it will follow the application open periods for all future rounds of funding.

**NOTE:** Please submit the application to [studentnetwork@ispor.org](mailto:STUDENTNETWORK@ISPOR.ORG) once it is completed and allow up to two weeks for processing. chapters may apply for two activity grants during the year due to availability of funding.

**APPLICATION:**

**Covered Expenses: Not Covered:**

|  |  |
| --- | --- |
| **Participant Travel Expenses** (air, taxi, hotel, train, tolls, mileage, etc.) | **Social events** (i.e. admission tickets, sporting events, etc.) |
| **Refreshments** | **Honorariums** (speaker fees/gifts) |
| **Gifts** (educationally focused only i.e. books, pens) | **Toys** |
| **Equipment for health events (**BP Monitors, Sugar/Glucose Monitors, etc.) | **Postage** |
| **Registration materials** (handouts, name badges, etc.) | **Bank fees** |
| **Meeting/Event related expenses** (room rental for meeting space) | **Icebreaker activities** (not educational in nature or are outside the scope of HEOR) |

Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_

University Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chapter President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application Type:**

New Application

Resubmission

**Has your chapter received funds this year?**

Yes - provide date and amount received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No

**Type of Event:**

Educational

Fundraiser

Networking

Prospecting (must include an educational component)

Other, Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reimbursement Information:**

**Requested Amount:**  $100  $200  $300  $400

**Check made payable to:** ­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Check must be made payable to the University/Student Chapter)

**Address for check to be mailed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Telephone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check here if your Student Chapter **DOES NOT** have a bank account

**Please Note:** If an international student chapter cannot establish a bank account due to banking restrictions within their country, monies can be issued directly to the University or Student Faculty Advisor for disbursement.

**Activity Description:**

Provide a detailed description of the Chapter Activity to be funded. Please note, funds received from Chapter Activity Grants can only be used for supported activities

**(See above Application Guidelines for details of covered and not covered activities/expenses).**

|  |  |
| --- | --- |
| **Date of event:** |  |
| **Location:** |  |
| **Anticipated Attendance:** |  |
| **Detailed Event Description** |  |
| **Event Objectives:** |  |

**Itemized budget:**

|  |  |  |
| --- | --- | --- |
| **Item Description** | **Total Cost** | **Amount Requested** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Please Note:** Within 30 days after the event, the chapter must submit a [Student Network Newsletter Submission Form](https://www.ispor.org/docs/default-source/student-chapter-president-resource-center/ispor-student-network-newsletter-submission-final.docx?sfvrsn=cd2aaf85_0) that provides a short-written summary describing the event. Once the form is completed it should be sent to the ISPOR Staff at [studentnetwork@ispor.org](mailto:studentnetwork@ispor.org). Please include photographs along with the summary so they can be published in the ISPOR Student Newsletter. You should also share a summary of your event in the Student Facebook Group to benefit other chapters. If you have any questions or concerns, please contact the ISPOR Student Network Chair, Grant Review Committee Chair, and ISPOR staff [studentnetwork@ispor.org](mailto:studentnetwork@ispor.org).

By checking this box, I acknowledge that this Application has been completed with the knowledge of my student chapter and faculty advisor. If funding is received, I agree that our chapter will write a summary of the event for the ISPOR Student Newsletter and the ISPOR Student Facebook Group.

Chapter President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

**(Signature)**

Faculty Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

**(Signature)**

ISPOR Staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

**(Signature)**