

## OHMES MEDICAL EDUCATION TRAVEL FUND

### 1.0 Purpose

The Office of Health and Medical Education Scholarship (OHMES) endeavours to enhance its strategic and educational objectives by supporting members of the Cumming School of Medicine (CSM) in medical education:

- to present the results of their research and scholarship in the area of medical or science education at national and international meetings,
- to attend meetings that will contribute tangibly to the development of expertise to support innovation within the CSM related to teaching methods, curricular development and assessment in medical and science education.
- to receive awards for education scholarship (such as CAME awards).

### 2.0 Eligibility:

*Eligibility is restricted to:*

- 2.1 Applicants who hold an academic appointment in the CSM including: full-time, part-time, or clinical and/or adjunct positions.
- 2.2 Attendance at national or international conferences, meetings, or workshops that focus on medical education, and/or contribute to teaching methods, curricular design and assessment.

### 3.0 Terms & Conditions

- 3.1 Financial support from OHMES is limited. Every effort should be made to secure funding from other sources before applying.
- 3.2 The maximum award is \$2,000 and is subject to the policies in the University of Calgary Travel & Expense Reimbursement Handbook.
- 3.3 Applicants are limited to receiving one award once every two fiscal years.

### 4.0 Review Process

All applications are reviewed by the OHMES Travel Fund Committee.

### 5.0 Notification

Applicants are notified by letter.

## **OHMES Medical Education Travel Fund**

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### **Application Procedure:**

Application is made using the form available from OHMES and must be accompanied by:

- 1) submitted abstract, if applicable
- 2) course outline including relevant documentation, if applicable
- 3) justification of travel request.

### **Send Applications to:**

Office of Health and Medical Education Scholarship

G253

Heritage Medical Research Building

University of Calgary

3330 Hospital Drive NW, Calgary AB, T2N 4N1

Email: [ohmes@ucalgary.ca](mailto:ohmes@ucalgary.ca)

Tel: 220-4342

### **Deadline for Receipt of Applications:**

- Applicants may apply at any time.
- Applications must be received by OHMES **at least TWO MONTHS PRIOR** to conference/ meeting dates.
- Retroactive applications will not be considered.

*Revised and Approved 24 June 2019 and 11 June 2018 by OHMES Advisory Committee*

*Approved 28 April 2016 by OHMES Executive Committee*

**OHMES Medical Education Travel Fund**

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**APPLICATION FORM**

NAME \_\_\_\_\_ DEPARTMENT \_\_\_\_\_  
TEL \_\_\_\_\_ EMAIL \_\_\_\_\_

**MEETING INFORMATION**

NAME \_\_\_\_\_  
LOCATION \_\_\_\_\_ DATE(S) \_\_\_\_\_

**EXPENSES (\$Cdn)**

TRAVEL (airfare) \$ \_\_\_\_\_  
GROUND TRANSPORTATION \$ \_\_\_\_\_  
ACCOMMODATION \$ \_\_\_\_\_  
REGISTRATION FEES \$ \_\_\_\_\_  
MEALS \$ \_\_\_\_\_  
OTHER (please specify) \_\_\_\_\_ \$ \_\_\_\_\_

MATCHING FUNDS: list funding organization(s)

\_\_\_\_\_ \$ ( \_\_\_\_\_ )  
\_\_\_\_\_ \$ ( \_\_\_\_\_ )

**TOTAL REQUESTED** \$ \_\_\_\_\_

**ATTACHMENTS** (please list)

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DEPT HEAD APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

**To be completed by OHMES Travel Fund Committee**

Approved Amount \$ \_\_\_\_\_

Not Approved Reason: \_\_\_\_\_

**OHMES Med Ed Travel Fund Committee (Chair)**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_