**GSACEP Scientific Assembly Grant Application**

The GSACEP Scientific Assembly Grant is intended to support GSACEP members in their academic pursuits, to encourage increased involvement in the Government Services Chapter and to cultivate future EM leaders. Recipients receive free conference registration to ACEP Scientific Assembly (valued at $670 for staff physicians and $375 for residents). Recipients are required to attend the GSACEP Board of Directors Meeting during the conference to receive recognition and foster familiarity with current EM issues important to the Government Services members.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service (AF, Navy, Army, VA, other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rank\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently a resident or medical student?\_\_\_\_\_\_\_\_\_\_\_

1. Please summarize briefly why you want to attend Scientific Assembly and why you should be considered and selected for this scholarship.
2. Would you be willing to attend if there is no central funding to cover hotel and travel fees? (Y/N)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unfortunately, this scholarship only covers conference registration (valued at $670 for staff physicians and $375 for residents). Awardees will need to attend and pay travel expenses. Please indicate if you plan on attending if central funding is not available.

1. Are you presenting at Scientific Assembly? (Y/N)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	1. If so, what? (abstract, lecture, other)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Do you serve on an ACEP or EMRA Committee? (Y/N) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	1. If so, which one(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Do you currently serve on a GSACEP committee?(Y/N)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	1. If so, which one(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Do you have prior ACEP/ GSACEP service to the chapter or College? (Y/N)\_\_\_

If so, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you have prior hospital, military, or residency leadership? (Y/N)\_\_\_\_\_\_\_ Please specify and describe your prior leadership roles.
2. Have you deployed before? Y/N\_\_\_\_\_\_\_ If so, where/when?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you for your interest. We look forward to seeing you at Scientific Assembly!

All grant recipients are invited and encouraged to attend the GSACEP Reception.