

# Student/Resident Scholarship Program Participation Application

46<sup>th</sup> Annual Meeting | September 13-15, 2019 | Omni Providence Hotel | Providence, Rhode Island

**Application Deadline: Wednesday, July 3, 2019**

## Scholarship Program

In an ongoing effort to support medical students and general surgery residents looking to explore vascular surgery as a specialty, the New England Society for Vascular Surgery is offering a scholarship program to encourage attendance at the 46<sup>th</sup> Annual Meeting and help off-set travel expenses. **Scholarships will be awarded to 20 individuals on a first-come, first-serve basis. Please Note: Slots typically fill prior to the posted deadline, so be sure to get your application in early.**

## Eligibility & Notification

**Medical students (PGY 1-4) and general surgery residents (PGY 1-5)** attending an accredited program in one of the six New England states are eligible for sponsorship. Fellows are not eligible. **Applications must be received by Wednesday, July 3, 2019 to be considered.** Notifications will be sent to accepted individuals via email, so please write your name and email address clearly on the application. Please Note: Incomplete applications will not be processed.

## Program Requirements

Accepted medical students and general surgery residents are **required** to attend the Professors' Rounds reception on Saturday, September 14, 2019 from 5:00 pm - 7:00 pm in order to receive reimbursement. This reception offers program attendees a unique opportunity to interact with the NESVS leadership in a small-group setting. Please Note: While still in the planning phase, there may be additional programming that will require attendance and participation. Once finalized, this information will be made available to applicants.

## Scholarship Details

Included in the scholarship program is complementary registration to the 46<sup>th</sup> Annual Meeting being held September 13-15, 2019 at the Omni Providence Hotel in Providence, RI. Registration includes all scientific sessions, luncheons, entrance to the exhibit hall and the Welcome Reception on Friday evening. Reimbursement will be provided after the 46<sup>th</sup> Annual Meeting once appropriate documentation and receipts have been received and reviewed by the NESVS Administrative Office. Reimbursement is as follows:

- Up to \$150 in travel expenses for those living within 25-miles of the Omni Providence Hotel (covers: mileage, parking and tolls)
- Up to \$500 in travel expenses for those living more than 25-miles from the Omni Providence Hotel, but still within the NESVS region - this includes the six New England states and Albany (covers: hotel accommodations at the Omni Providence Hotel, mileage, parking and tolls)

*\*Meal reimbursement is up to \$25 per meal.*

*\*\*Reimbursement is for the Omni Providence Hotel only. Reimbursement will not be provided for stays at other hotels in the area.*

## Applicant's Information (PLEASE PRINT CLEARLY)

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Institution

\_\_\_\_\_  
Institution City & State

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Email Address

You must check one of the following for your application to be considered:

CATEGORY

YEAR

Medical Student

1<sup>st</sup> year  
 2<sup>nd</sup> year

3<sup>rd</sup> year  
 4<sup>th</sup> year

General Surgery Resident

1<sup>st</sup> year  
 2<sup>nd</sup> year  
 3<sup>rd</sup> year

4<sup>th</sup> year  
 5<sup>th</sup> year

Would you be interested in mentorship while at the Annual Meeting (eg: coffee or one-on-one time with a more senior member of the Society):

Yes  No

## Case Presentation

Applicants are strongly encouraged (although not required) to prepare a brief presentation on a case of their choosing. Please indicate below if you would like to present a case at the Professors' Rounds reception:

- Yes, I plan on presenting a case.  
 No, I will not be presenting a case.

Case Presentation Topic:  
\_\_\_\_\_

Please Note: Due to time constraints, presentation is not guaranteed. PowerPoint presentations are due **Wednesday, July 17, 2019 for review and selection.**

## Nominated By

- Chief of Vascular Surgery  Chief of Surgery  
 Program Chair  Department Chair

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Institution

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Email Address

**Please Email Completed Application to:  
nesvs@administrare.com**

[Do Not Mail or Fax]