



CATHOLIC MEDICAL ASSOCIATION

Upholding the Principles of the Catholic Faith in the Science and Practice of Medicine

MEDICAL STUDENT AND RESIDENT CONFERENCE SCHOLARSHIP APPLICATION

The CMA's Annual Educational Conference scholarship program is available for medical school student and resident CMA Members.

The scholarship covers the full conference registration fee, which includes presentations, breakfasts and lunches, and the banquet. Applicants must be members of the CMA; non-members must either join online or enclose a membership form and payment with this application. Applicants are responsible for a \$100.00 registration fee and for their own travel and accommodations. The scholarship does not include special events.

The CMA encourages medical students to first work with local CMA guilds to obtain financial support.

Scholarships are offered on a first-come, first-served basis to those qualifying. Deadline for application is July 31st. Applicants will be notified shortly after that deadline, if not earlier, as to whether or not they have been awarded a scholarship.

Name: _____ Gender: _____

Address: _____

City: _____ State: _____ Zip: _____

Country: _____ Phone: _____

Email: _____ CMA Member since: _____

Medical School Attending: _____ Graduation Year: _____

The cost of a hotel room at the conference site this year is \$199.00 per night, plus taxes. The CMA reserves some rooms for medical students and residents so that individuals can save money by sharing a room with another medical student or resident of the same gender. The cost of the room is not covered by the CMA and individuals will be responsible for coordinating payment directly with the hotel upon check out. The room will be reserved for the duration of the conference (Wed. - Sun. check out). Would you like the CMA to place your name on the room

list? _____ If yes, name of roommate preference(s): _____



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Have you asked your local guild, Knights of Columbus, Archdiocese, etc. to sponsor you?

If they are supporting you, at what level? _____

Would you be interested in becoming a "Program Assistant" to assist with on-site conference logistics and as a way to network with CMA members?

Are you planning to present a scientific/academic poster at the Poster Session? _____

Have you attended a Medical Student Boot Camp? If yes, which year(s): _____

Have you attended an Annual Conference in the past? If yes, which year(s): _____

Are you a CMA-SS or CMA-RS leader? _____

Please include a brief statement of need for a scholarship:

Please return this form to: Linda Donnelly, *Fkt gevqt 'qhlGxgpwu* at the contact information listed below.