

ORADE APPLICATION FORM:

To apply for an ORADE educational grant, please complete the form below and email to Sandy Kennedy: skennedy@ontariorheum.ca

Applicant Information	
First & Last Name	
Corporation (if applicable)	
Mailing Address	
International Scientific Meeting (Funding up to \$5,000)	Name of Meeting: Destination: Dates:
International Rheumatology-related Course (Funding up to \$2,500)	Name of Course: Destination: Dates:

Proposed Budget (In adherence with ORADE Finance Policies)	Estimate
Conference Registration	
Airfare	
Ground Transportation (taxi, train, bus)	
Hotel Accommodations	
Meals	
Other	
Total:	

Financial Disclosure:

- I have not received funding from other sources to attend this educational event

Request for Selection: In 250 words or less, please describe the course and learning benefits

If successful in receiving financial support from the ORA, I agree to the following:

- I agree to provide a written summary of my key learnings within 6 weeks of attending the event (min 500 words; max 1000 words). This summary may be posted on the ORA website
- If requested, I agree to provide a workshop presentation at the ORA November Retreat and/or the ORA Annual Scientific Meeting

Signature: _____

Date: _____