

# The Harry Barnes Endowment Travel Grant Application Form

AAO-HNSF 2015 Annual Meeting & OTO EXPO<sup>SM</sup>

September 27 — September 30, 2015

**Submission Deadline: Monday, July 27, 2015**

## Grant Application Requirements:

- Current resident member of the Academy of Otolaryngology—Head and Neck Surgery (AAO-HNS) in good standing.
- Person of African descent from the United States, Caribbean or Canada.
- Submit a 500-word essay on the topic: How I Can Promote the Charge of the Diversity Committee.
- Required to attend the Diversity Committee meeting on Sunday, September 27, 2015.
- Submit a 750 word post-meeting essay about your meeting experience. This essay will be published in the Bulletin and is due by Monday, October 19, 2015.



Receipt of this travel grant may have some tax implications for you; therefore, it is therefore recommended that you contact your tax advisor to determine your circumstance before accepting the grant. **Please choose how you would prefer to receive the grant funds, should you be selected** (choose only one):

### Option 1 - Available for All Applicants

Pay directly into my account (I will complete an ACH authorization form and provide a voided check should I be awarded this grant).

### Option 2 - Available for Applicants in US & Canadian Institutions Only

Pay directly to my training program institution. Make check payable to \_\_\_\_\_

### Option 3 - Available for Applicants in Caribbean Institutions Only

Pay by wire transfer to my training program institution (I will complete a Wire transfer form)

Training Program Director's Name

Email

Training Program Director's Signature

Member ID

Date

Institution Name:

Institution Address:

Resident's Name

Email

Resident Address

Phone Number

I, the undersigned hereby apply for the 2015 AAO-HNSF Annual Meeting & OTO EXPO<sup>SM</sup> Harry Barnes Endowment Travel Grant. I understand and agree to accept the terms as described above if chosen to receive an AAO-HNSF Travel Grant. I am responsible for attending the conference and must attend the Diversity Committee meeting on Sunday, September 27, 2015 from 2:15 - 3:15 pm. If I do not comply with these terms and application requirements, I will be held responsible for repaying the \$1,000 grant to the AAO-HNSF, and without a valid reason this will preclude my training program from receiving travel grants in the future. I understand that accepting this grant prevents me from accepting any other AAO-HNSF annual meeting travel-related grants during 2015. I understand this information will be tracked through my membership file.

Resident Signature

Member ID

Date

## Diversity Committee Charge

Educate and promote diversity and inclusion in all its forms including gender, race, religion, socioeconomic status, disability, geographic location, sexual orientation, age, and cultural within our membership and especially in our leadership. Promote cultural sensitivity and competence in concert with other Academy committees, first to the membership and medical schools, and then to the public for the best treatment of ear, nose, throat, head and neck disease.

Email Completed Application to [RScott@entnet.org](mailto:RScott@entnet.org), or Fax 1-703-684-4288