



GULF COAST CONFERENCE STIPEND APPLICATION

*(All applicants must reside in one of the following 5 states:
Alabama, Florida, Louisiana, Mississippi or Texas)*

INSTRUCTIONS

A limited number of stipends are available for Gulf Coast participants and presenters attending the National Conference on Health and Domestic Violence being held in New Orleans, October 8-10, 2009. All applicants must reside in one of the following 5 states: Alabama, Florida, Louisiana, Mississippi or Texas

Applicants may apply for one of the following stipends:

- Pre-Conference Institute Registration only (October 8)
- General Conference Registration only (October 9-10)
- Both Pre-Conference Institute Registration and General Conference Registration (October 8-10)

DEADLINE for stipend submission is October 1, 2009. Decisions will be mailed within 1 week of receiving your application. Stipend recipients will be given a promo-code to enter into the online registration form (waiving the associated fee); therefore, no reimbursement will be necessary.

All instructions MUST be followed exactly or your request will not be considered.

The criteria that the FVPF will base its decision on when awarding stipends include:

- Whether or not the applicant lives in the Gulf Coast Area.
- Whether or not one's institution does or does not provide funds to participants or presenters to deter travel costs
- annual gross income
- need for the stipend

Fax, mail or E-mail your completed application to:

Family Violence Prevention Fund
Attn: Vedalyn DeGuzman
383 Rhode Island Street, Suite 304
San Francisco, CA 94103-5133
Vedalyn@endabuse.org
Fax: 415-252-8991

Please contact Vedalyn DeGuzman (415) 252-8900 x15, vedalyn@endabuse.org with questions, or for more information regarding your application.



National Health Resource Center on Domestic Violence
383 Rhode Island Street, Suite 304
San Francisco, California, 94103-5133
1-888-Rx-ABUSE, www.endabuse.org/health

Gulf Coast Area Stipend Request Form

Form must be typed or printed legibly. All information MUST be complete, and should not include extra notes.

DEADLINE for stipend submission is October 1, 2009

Name: Title:

Organization:

Address:

City, State, Zip: Phone:

Fax: Email:

Are you a government employee? (circle one) Yes / No
Are you a health professional student? (circle one) Yes / No [If yes, what is your discipline:]

Stipend Request: (choose one)

- Pre-Conference Institute Registration only (Oct. 8)
General Conference Registration only (October 9-10)
Both Pre-Conference Institute Registration and General Conference Registration (Oct. 8-10)

My institution(s) does/ does not (circle one) potentially provide any funds to presenters/participants to deter travel costs. If your institution does provide funds please indicate sum potentially provided \$

Please also include name, title, and phone number of supervisor/employer who can verify this statement.

Supervisor Name/Title: Supervisor Phone:

Annual Gross Income: (Please circle category which applies to you)

- \$24,000 or less \$34,001-\$45,000 \$60,001 or more
\$24,001-\$34,000 \$45,001-\$60,000

Briefly explain need for stipend:

Three horizontal lines for explaining the need for stipend.

All information provided is accurate. I understand that any false information will result in immediate withdrawal of abstract acceptance. I agree to pay the Family Violence Prevention Fund back any stipend amount received if I am unable to attend the 2009 Conference for any reason.

Signature: Date:

Print Name: