



Educational Grant Application

Name of applicant: _____

Address: _____

_____ Postal Code: _____

Phone: _____ email: _____

Date of session: _____

Location of session: _____

Description of educational session attended: (please attach brochure & relevant receipt(s) ie: hotel, flight, conference registration)

How did this seminar/conference benefit your foot care practice?

Signature: _____ Date: _____

For Committee use only:

Date application received: _____

Committee approval: Yes: _____ No: _____ Date: _____

Comments: _____

Amount approved: _____ Date cheque issued: _____

Policies:

- ✓ Applicants must be a member of the MAFCN since January of the year applying for the educational session was taken
- ✓ Applications shall only be considered following completion of the educational session
- ✓ All areas of the application form must be completed, and session registration fee receipt must be attached
- ✓ Application must be submitted no later than 30 days following completion of the conference session
- ✓ Applications will be reviewed in June & November.

Criteria:

- ✓ Applications must be members of the MAFCN since January of the year applying
- ✓ \$3000.00 per year from general revenue will be used to subsidize education to be divided as follows:
 - \$1500.00 will be reimbursed for in/out of province education/conference in June. This amount to be divided equally among applicants but not to exceed \$175.00 per applicant.
 - \$1500.00 each year will be reimbursed for reimbursed for in/out of province education/conference in November. This amount to be divided equally among applicants but not to exceed \$175.00 per applicant.

Please scan all documents and email to info@mafcn.ca