



Erickson Explorer Award for Humanitarian Care Fund

Application for Funding

Timothy Erickson, MD has provided up to \$1,500 in funds so one medical resident or fellow from the University of Illinois at Chicago has an opportunity to support an international humanitarian, service or scholarly initiative in 2019-2020. This merit award is intended to support travel/flight expenses to underserved, remote regions of the world in low-middle income countries. The elective rotation should be designed to provide humanitarian medical care, advance global health research, provide capacity building or other educational programs in these selected regions of the world. The Center for Global Health is honored to be able to offer you this opportunity.

Timeline:

Announcement: July 1, 2019

Letter of Intent: July 15, 2019

Full proposal: July 31, 2019

Criteria for eligibility for funding support:

- You are a medical resident or fellow in good standing, at the University of Illinois at Chicago College of Medicine.
- You have an approved elective rotation in a medically underserved low to middle income country.
- The funding requested can be used for travel, lodging, food/per diem, travel immunizations, etc.
- You have a faculty sponsor at UIC and at international location.
- Upon completion of elective rotation you are required to provide a summary and/or presentation of your experience and the impact on your medical career to the Center for Global Health and provide recognition (photos and thank you letter) to donor.

Letter of Intent:

To submit a Letter of Intent, please send an email to Jeanne Burian at jburian@uic.edu with the following information by **July 15, 2019**.

Subject: Erickson Explorer Award – Medical Resident/Fellow (your name)

Body:

- Project concept
- Project location
- Approximate month/time of year when you would like to do your elective

Full Application:

Application submission must include:

1. Completion of Personal Information Form – see below
2. Description of elective rotation – see below
3. Personal Statement of how this fits into your medical education (no more than 1 page)
4. Resume
5. International elective rotation signed approval form

This is competitive, merit-based award and The Center for Global Health approval committee may require in-person interview and shall determine the recipient, amounts and timing of the funds to be disbursed which are subject to the approval of the appropriate University officials. The funding shall be known as the "Erickson Explorer Award for Humanitarian Care" and shall be appropriately recognized and publicized.

Submit full applications to: Jeanne Burian at jburian@uic.edu no later then July 31, 2019

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PERSONAL INFORMATION FORM:

Your Name:

Full Address:

Phone:

Email Address:

Degree(s)/Education in Process:

Expected Date of Graduation or Completion of Program:

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DESCRIPTION OF INTERNATIONAL ELECTIVE ROTATION/PROGRAM PROPOSAL (3 page limit):

- 1. A brief, clear description of project/proposal to include: site/hospital location, primary objective, introduction/background, proposed methods, anticipated outcomes/conclusion, references:**
- 2. Sponsoring UIC Department (ex. Pediatrics, Family Medicine, Research etc):**
- 3. Your UIC Faculty sponsor (name, department, phone, email):**
- 4. Your International Faculty sponsor (name, degrees, institution, phone, email):**
- 5. Anticipated Dates of Travel:**
- 6. Budget/Funding Being Requested:**
 - Airfare:**
 - Lodging:**
 - Per Diem (food):**
 - Land Transportation:**
 - Travel Immunizations:**
 - Other:**
 - Total Funding Requested:**



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