



MSDU Sonographer Grant Application

MSDU Annual Seminar Year 2020

SONOGRAPHER INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone (_____) _____ Email _____

******Please note: Notification of grant awards will be made via email, applicants will have 48 hours to respond and accept grant.******

I am registered in the following specialty areas: (check all that apply)

- Abdomen Breast Cardiac (Adult) Cardiac (Fetal) Cardiac (Pediatric)
 Neurosonology Ob/Gyn Ophthalmology Vascular

ARDMS Registry #: _____

To be eligible to apply for a sonographer grant, applicants must (at time of application):

- 1.) Be an MSDU member in good standing,
- 2.) Be registered by the ARDMS,
- 3.) If selected to receive a grant, the applicant must register for the MSDU Spring Seminar and attend all of the lectures on Saturday and Sunday.
- 4.) Provide a letter from his/her employer (on institutional/company letterhead) indicating that time will be provided for the sonographer to attend the meeting and employer does not provide funding for the 2020 MSDU Annual Seminar.

MSDU Annual Seminar grant recipients will be selected via a lottery drawing of all applicants received by **April 1st, 2020**. The sonographer grant amount is currently at \$250 and will be available to pick up at the registration table on Sunday after the seminar.

Completion of this form does not guarantee receipt of a grant.

Mail completed application to: Meghan Kasper, 1498 Pinewood Drive, Shoreview MN, 55126

-OR- scan completed form to PDF format and email to meghankasper@msdu.org

Notification of grant awards will begin within 7 days of the application deadline. To be considered for a grant, applications **MUST** be received by **April 1st, 2020**.

I understand and will abide by the guidelines stated above. Further, I understand that falsification of any of the information provided will result in the rejection of this grant application.

Signature _____ Date _____