

**Steve Haskins Memorial Scholarship
Veterinary Emergency and Critical Care Society**

Award Application

ACVECC-approved resident to attend the International Veterinary Emergency and Critical Care Symposium

Name and Veterinary Degree: _____

Street Address: _____

City: _____

State: _____

Zip code: _____

Best contact telephone #: _____

Email address: _____

Veterinary college conferring degree: _____

Year of graduation: _____

Current ACVECC-approved resident of
(hospital name): _____

(city, state): _____

ACVECC Mentor name: _____

Mentor email address: _____

Applicants will be ranked according to a point system. Those with the highest point scores will be selected. If number of applicants with maximum point scores exceeds number of awards available, a drawing will be conducted from among maximum point scores to establish recipients.

Point System:

Year of residency:

Current 2nd Year (will be 3rd year at time of IVECCS) (2 points)

Current 1st Year (will be 2nd year at time of IVECCS) (1 points)

IVECCS/ VECCS participation

Presented at prior IVECCS (2 points) (includes abstract/ poster/ case report)

Yes No

Name of presentation and year: _____

Submitted an abstract, poster, case report or resident focus presentation for upcoming IVECCS (2 points)

Yes No

Title of presentation: _____

Prior work for IVECCS (moderator, etc.) or committee work (1 point for each year with a max of 5 points)

Year: _____ Work completed: _____

Year: _____ Work completed: _____

Year: _____ Work completed: _____

Year: _____ Work completed: _____

Year: _____ Work completed: _____

VECCS / SVECCS active membership

VECCS member in years prior to scholarship application year (1 point per consecutive year for max of 3 points)

Year: _____

Year: _____

Year: _____

(If SVECCS, list chapter/ university) _____

Submit application by saving completed file and emailing to Yskuz#S2Uh_ž eg2Wg, no later than May 1st, 2011, 9:00 PM Eastern Daylight Time.