ORTHOPAEDIC Section, APTA
ORTHOPAEDIC CLINICAL RESIDENCY OR FELLOWSHIP PROGRAM
GRANT

The Orthopaedic Section will award three grants a year, each in the amount of a $1,725 application fee for residency programs that are designed for 1-5 residents. The total grant amount available each year is $5,175. A program will become eligible to submit for a grant once it has received a letter from the ABPTRFE that it has been approved for a site visit.

Application Process

The Orthopaedic residency or fellowship program will submit its grant application to the Residency and Fellowship Education committee via e-mail. The application must include the following:

- Completed application cover page
- Completed essay
- Copy of the site visit letter from ABPTRFE.

The Residency and Fellowship Education committee will be forwarded blinded versions of all applications to review, during the first week of January. The committee will provide recommendations to the Orthopaedic sections Board of Directors for which three programs should be awarded the annual grants. Grant award winners will be made public at CSM annually.

Criteria for selection of grants:

1- Financial need
2- Quality of the application

Each criteria is weighted equally

GRANT APPLICATION DEADLINE: December 15 annually.

Format for grant application: submit electronically to Aimee Klein, PT, DPT, DSc, OCS: aklein1@health.usf.edu

Rev. 6-13-12
ORTHOPAEDIC SECTION, APTA
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APPLICATION COVER SHEET

*Available to Orthopaedic Section Members Only*

Name of Residency or Fellowship Program:
________________________________________________

Person submitting grant application________________________________________________

Position in residency or fellowship program _________________________________________

APTA Membership Number: _____________________

E-mail Address:____________________________________________________

Contact Number: __________________________________________________

Signature of person completing application (Electronic Signature accepted):
_______________________________________________________________

Essay Question: In one page or less please provide the following information (if applicable):

- Statement of financial need
- Purpose for applying for grant support
- An overview of your programs philosophy and objectives
- Program requirements/opportunities to promote Orthopaedic physical therapy
- Community services projects in which resident or fellow is engaged.
- Requirements to present/publish scholarly activity

E-mail application to:

Aimee Klein, PT, DPT, DSc, OCS
aklein1@health.usf.edu

Any questions concerning the application process may be sent to Aimee Klein or the Orthopaedic Section office: tfred@orthopt.org.