

Student Activity Fund Allocation

A Student Activity Fee is collected from all students enrolled in the Public Health and Professional Degree (PHPD) Programs. These funds are used to finance the fitness center, student activities, events, educationally related travel and for Public Health Student Senate-related activities. Requests for funds must be submitted via a Student Activity Fund Request Application to the Student Activity Fee Committee that includes the Associate Dean of PHPD Programs, 2 Public Health Student Senate Members, and a Faculty Member. Approval of funding requests will be based on the merit of a student's application and the availability of funds. Priority is given to students who are presenting a poster or paper at a conference or meeting. If you are a dual degree student the committee recommends seeking support from both programs for which you are affiliated, and noting so on your application. Funds cannot be used to support academic or departmental related projects. All recipients of funds will be expected to provide an accounting of funds received. *Guidelines for specific types of requests are noted below. Following these guidelines, does not guarantee a successful award.*

Events and Speakers

Funding requests for events and speakers *must be made prior to the event* and include a direct message to all PHPD Programs' students and may not be an extension or part of an academic course.

- Events should have the students as a focus and be of interest to them
- Outreach for attendees should be aimed primarily to the PHPD Programs' students
- Speakers' message should directly address a topic related to one or more of the Public Health and Professional Degree program areas.

Travel/Conference Requests

Travel funding requests *must be made in advance of the expected date of travel or conference*. Ideally requests should focus on conferences, competition or student presentation opportunities.

A successful request will include the following:

- A statement of how the newly acquired knowledge will contribute to the student's professional development.
- Safe housing accommodations that are reasonably priced.
- Travel dates that correspond exactly with the active part of the conference and do not include extra days before or after. This does not apply if you are locked into reservations for the night before or after the conference because of your mode of transportation.
- The student contributes financially to some portion of the trip.
- Written support of this trip from the relevant program director or concentration leader.
- Students willingness to share their newly acquired knowledge or research in a mutually agreed upon forum.

**Priority will be given to those students who are presenting a poster or paper.*

Application Process

- Write a brief statement explaining what you want to do and why you think you're deserving of financial support.
- Complete an individual application form providing the required supporting documentation:
 - A written letter per application instructions
 - Complete an itemized budget summary
 - Include any supporting documents you think will benefit your application e.g. conference brochure etc.

Deadline

- The Committee reviews completed applications twice a semester. Application deadlines are: September 15th, November 15th, January 15th, and March 15th, and June 15th. *Late or group submissions will not be accepted.*

Notice of Decision

- Award/decline notices will be sent via email 2 – 3 days after the Committee meets.
- If the application is declined, a student may apply again by re-submitting it with revisions for review by the Committee at their next meeting.



Student Activity Fund Request Application

PERSONAL INFORMATION

First and Last Name: _____		
Student ID#: _____		
Program: _____	Concentration: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____
Telephone #: _____	Email: _____	

TYPE OF FUNDING REQUEST

I am requesting funding for (Check one)	
<input type="checkbox"/> Event/Speaker	<input type="checkbox"/> Travel/Conference
Have you received event/travel related funds previously during this academic year? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date received: _____	Amount Received: _____

EVENT AND SPEAKER RELATED REQUEST

Date of Event: _____

Event Title: _____

Please attach the following:

1) A letter describing the event that should include the following:

- Purpose of the event
- Relevance to PHPD Programs' Community
- Advertising/Outreach Plan
- Anticipated Attendance (size/composition)
- Speaker(s) name, affiliation and brief bio
- Members of Planning Group

2) Proposed budget for the Event, including:

- Itemized costs and revenues
- Amount request and list of potential donations

TRAVEL/CONFERENCE RELATED REQUEST

Name of Conference: _____

Location of Meeting or Exhibition: _____

Role at Conference: Presenting a Paper (oral) Presenting a Poster Attending

Dates of Travel: _____ Mode of Travel: _____

Please attach the following:

1. A letter detailing your role at the conference or how it will contribute to your professional development.
2. A detailed budget.
3. A copy of the paper you will be delivering or a catalog or program providing details about your work that will be exhibited.
4. Conference Itinerary: A print out from the conference which states the dates, location and schedule of the conference.
5. Registration Fees: A print out from conference listing the registration fees. You may satisfy this confirmation by attaching a receipt for your registration cost.
6. Mileage Confirmation: Attach a print out from MapQuest (*or similar site*) giving distance from Tufts Medical School to your destination. ***This is only required if you are driving to your destination and will be seeking reimbursement for mileage.***

PROGRAM DIRECTOR OR CONCENTRATION LEADER APPROVAL

Program Director/Concentration Leader Name (*please print*): _____

Program Director/Concentration Leader Signature: _____

STUDENT ACTIVITY FEE COMMITTEE (SAFC) DECISION

Approved by SAFC Declined by SAFC

Associate Dean for PHPD Programs: _____

Submit Application To:

Student Activity Fund Committee
 Attention: Olivia Zimra-Turley, PHPD Student Services Coordinator
 136 Harrison Avenue, M&V 142 Suite
 Boston, MA 02110
 Fax: (617) 636 – 0898
Olivia.zimra_turley@tufts.edu

Date Application Received: _____ Initial: _____

11/15/2016