



GENERAL PROVISIONS

Indiana Lyme Connect, Inc. (“ILC”) allocates a limited annual budget to Indiana physicians and healthcare providers seeking to attend the fall Annual Lyme Disease Conference sponsored by the International Lyme and Associated Disease Society, ILADS. The following provisions apply to all applicants for all such funding:*

1. The attached written application form must be submitted by August 20, 2017.
2. A formal interview via phone will follow the written application.
ILC will inform applicants of grant awards no later than August 31 2017.
3. First time attendees to ILADS conference, are eligible for the one day Lyme Fundamentals Course in addition to two additional days of the Scientific Conference.
4. Previous ILADS conference attendees, are eligible for the three day Scientific Conference.
5. ILC will provide a \$1000 stipend for the fall ILADS training/scientific conference which will cover registration. Applicants might consider an ILADS membership which provides a discounted conference registration fee.
6. Within thirty days after attending the conference, the attendee will submit a brief, formal report on each of the workshops attended, impact of the ILADS conference on his/her future personal healthcare practice, as well as any recommendations for furthering Lyme education in Indiana. The stipend reward will follow the submission of the report.

*ILADS offers both a one day Lyme Fundamentals Course (Nov 9) and a three day Annual Scientific Conference (Nov 10-12) called “Tick -Borne Diseases: The Global Perspective” See ILADS.org for more information.

Please submit your application in writing by August 20, 2017:

Indiana Lyme Connect Association
1075 Broad Ripple Ave
Suite # 252
Indianapolis, IN 46220

Training Stipend Application

Personal Information

Last	Middle	First

Address

--

City	State	Zip

Phone	Email	Fax

Professional Information

Degree(s): _____

Type of Practice: _____

Education:

Institution	Date of Graduation

Certifications

Organization	Certification	Date

Residency

Institution	Dates of Service

Professional Organizations

Name	Membership Dates

Has your license for practice ever been revoked, suspended or placed on probation for any reason? If so, please explain.

Do you personally know individuals with Lyme Borreliosis Complex? If so, in what capacity?

What are your views about chronic Lyme disease?

Why are you interested in attending this conference?

How did you hear about ILC's medical conference grant for ILADS conference?

Are you currently an ILADS member? If not, will you be joining ILADS in 2017?

Note: Membership status affects conference pricing.

Have you previously attended an ILADS training conference? If so, when?

Note: This will assist us in determining which days we will sponsor for the event.

Signature: _____

Date: _____