**Global Health Travel Fellowship 2024 Application**

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**Part I. Fellowship Information**

**Letter to the Applicant**

Dear Applicant,

Thank you for considering applying for a Department of Global Health (DGH) Travel Fellowship! We are excited to be able to support student travel up to $4000 for the purposes of completing global health activities abroad as part student education at the University of Washington.

The Department of Global Health feels that travel can be an important part of global health education and knows that travel expenses can be a significant hurdle for students. Experiencing the context in which your work takes place can help you become a better global health researcher/practitioner, however, if you aren’t a member of the community you are working with, it is imperative to place as little burden on your host community as possible. In this spirit, DGH prioritizes funding for students engaging in in-depth experiences and projects from which their host community will directly benefit.

**ROLLING APPLICATION PROCESS (new for 2024):**

You may submit your application any time up until May 1, 2024. Applications will be reviewed on a rolling basis in the order that they are submitted. If funds are exhausted before May 1, 2024, then the application will close once funds are exhausted. The application will re-open in Autumn 2024 for the 2024-2025 academic year. A decision will be made on an application within 2-4 weeks of submission. Incomplete applications will not be reviewed.

Please submit your application three months prior to actual travel dates, so that you have enough time to complete pre-travel requirements (which must be completed before your funds will be dispersed to you.) If you are planning for your travel to start in Autumn, please reach out to the travel funding manager, Kirsten Greene, for advising.

**REQUIREMENTS FOR RECIPIENTS:**

All travel fellowship recipients must abide by all fellowship, Department of Global Health, and University of Washington policies that pertain to travel under this fellowship. Failure to do so may result in the withdrawal of a fellowship. The Department of Global Health takes these policies seriously, and fellowship recipients are expected to do the same.

Questions about these requirements should be directed to the travel fellowships program manager. We look forward to receiving your application!

Sincerely,

Kirsten Greene, MA

Program Manager

**Eligibility, Award Conditions and Requirements**

Applicants must meet the following eligibility criteria:

* Enrolled in any graduate or professional school at the University of Washington
* If an applicant is awarded a Warren G. Povey Fellowship, they will no longer be eligible for travel funding through this application

Project proposals must meet the following eligibility criteria

* Identifies a UW faculty mentor for the project
* Identifies a host organization and supervisor for the project
* Project addresses a global health issue or problem
* Travel duration must be a minimum of four consecutive weeks in the host country

Award Conditions

* Funds may support student travel costs including lodging, travel health expenses, travel insurance, FRILA fees, and project supplies
* Funds may not support tuition costs, school supplies, conference attendance, or any other expenses not associated with the project proposed in your application

Recipient Requirements

After accepting an award offer, recipients must complete post-award assignments before funds will be dispersed to them. This includes:

* Online asynchronous orientation
* Travel registration with the UW Study Abroad office via FRILA
* Completion of all required administrative forms
* Meeting with Travel Fellowships Program Manager (Kirsten Greene, kngreene@uw.edu)
* Enrollment in approved UW Travel Insurance (or receive approval to waive from the UW Office of Global Affairs)
* Other requirements may apply

**Application Checklist**

Review this checklist to ensure all requirements are completed. Incomplete applications will not be considered.

\_\_\_\_\_ Demographic Information (can be entered directly into the online form)

\_\_\_\_\_ Project/Experience Description

\_\_\_\_\_ Proposed Budget

\_\_\_\_\_ Statement of Commitment from Host Organization

\_\_\_\_\_ UW Faculty Mentor Letter of Recommendation

\_\_\_\_\_ Most recent unofficial UW academic transcript

\_\_\_\_\_ Statements of Understanding and Agreement (can be entered directly into the online form)

**Application Formatting and Submission Instructions**

In order to review your application in an efficient and timely manner, it is important that you format your application according to the instructions below. Please read these instructions **CAREFULLY!**

**Review Timeline**

Your application should be submitted around 90 days prior to your actual travel dates. If you apply before you have firm travel dates, you may be asked to re-apply after you have determined your travel dates. If you apply less than 90 days prior to your actual travel, there may not be enough time for your application to be reviewed and for you to complete all of the pre-award dispersal requirements. (Please note that award funds cannot be dispersed post-travel or retro-actively.) If you are planning for your travel to start in Autumn, please reach out to to the travel funding manager for advising.

**Submitting your application**

Submit your application here: <https://forms.office.com/r/RqkU6sAxUd>**.** You must be logged into your UW account to access the application. The online application submission form will ask you to enter information also contained in your application documents. This allows for more efficient and timely review of your application. Please enter all the information requested in the form (and refrain from entering responses like ‘Refer to application’).

 It is your responsibility to review your application for accuracy and completion before submission.

**Formatting your supplemental documents for submission**

In the online application submission form, you will be asked to submit the documentation listed in this application’s checklist.

Free tools are available online for converting other document types to .pdf format and for combining multiple .pdf documents into one .pdf document:

* Free PDF Converter: <https://www.adobe.com/acrobat/online/convert-pdf.html>
* Free PDF Merger: <https://www.adobe.com/acrobat/online/merge-pdf.html?mv=search&sdid=DZTGZX2P&ef_id=EAIaIQobChMIp_bAmLud_AIVhzKtBh0NDgjlEAAYAiAAEgKPPvD_BwE:G:s&s_kwcid=AL!3085!3!559402382066!e!!g!!how%20to%20combine%20pdf%20files%20into%20one%20document!13092672132!120630851645&cmpn=mobile-search&gclid=EAIaIQobChMIp_bAmLud_AIVhzKtBh0NDgjlEAAYAiAAEgKPPvD_BwE>

Please note that reviewers will be reading your application EXACTLY as you submit it online. It is recommended that you format your application so that the different documents are clearly titled and that your name appears on each page.

**PLEASE NOTE:** Application materials should only be submitted via the online form. Please give your host organization and faculty mentor enough time to write letters for you and send them to you so you can submit them with the rest of your application. **Please refrain from having any application materials sent to staff via email.** This will delay review of your application and may result in your application being removed from consideration.

**Questions?**

If you have questions about fellowship criteria, eligibility, formatting and/or submitting your application, please reach out to Kirsten Greene (kngreene@uw.edu) for advising.

**Part II. Fellowship Application Supplemental Documents**

**Project/Experience Description**

This proposal should address the following (3 **pages maximum, please refrain from including images**):

* Statement of the problem addressed by this project (1-2 *sentences* max.)
* Background on project and details of activities
* Objectives and methods for completing the project, including your specific role in this project
* Timeline for travel and completion of project
* If research, indicate if you’ve applied for human subjects approval (IRB) and where you are in this process
* Discuss your skills and abilities as they relate to your ability to successfully complete the project you are proposing. Please include language skills, positionality as it relates to your project, and your professional or academic background, or lived experience.
* Discuss how your host organization and host community will benefit from both your travel and your project.

**Proposed Budget**

List your proposed expenses for all travel and project related expenses below. Although your budget may exceed $4,000 (USD), our fellowships will not exceed $4,000 (USD) in support, and you will need to cover the remainder expenses using other sources.

|  |  |
| --- | --- |
| ***Item*** |  ***Cost (in USD)*** |
| Health Screening with Primary Care Provider  |   |
| Travel Health Consult fee |  |
| US Health Insurance |   |
| Travel Health Insurance [fees](https://www.washington.edu/studyabroad/students/resources/finances/study-abroad-fee/) |   |
| FRILA enrollment [fee](https://www.washington.edu/studyabroad/students/resources/finances/study-abroad-fee/) (FRILA enrollment is mandatory for all fellowship recipients) |  |
| Vaccinations |  |
| Malaria Prophylaxis |  |
| Post-Exp. Prophylaxis (HIV) (if clinical/direct care experience) |   |
| Airfare |   |
| Visa |   |
| Airport fees/Departure Tax |   |
| Lodging |  |
| Taxi/Bus/Rail |   |
| Food |   |
| Phone |   |
| ***Please list other items that will be > $50USD value*** |
| Project Supplies: |   |
| Other:  |  |
| **TOTAL COST:** |  |

Please indicate if you are applying for and/or have received additional sources of funding for this project/experience.

|  |  |  |
| --- | --- | --- |
| ***Name of Award/Funding Source*** | ***Amount*** | ***Applied or received?*** |
|  |  |  |
|  |  |  |
|  |  |  |

**Statement of Commitment: Host Organization**

**Applicant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The purpose of the of our Department of Global Health (DGH) administered fellowship awards are to promote global health by providing financial assistance to graduate/professional students or medical residents who would like to gain practical global health field experience in international or underserved community settings. In order to receive one of these DGH-administered Fellowships, students/residents need to demonstrate a commitment by *you* and *your organization* to provide on-site supervision and guidance while the student is in-country working with your organization. The student will also identify a University of Washington faculty mentor to provide guidance to connect the applicant’s activities to their academic program and career goals.

|  |  |  |
| --- | --- | --- |
| Host Organization/University: | Country location:  | City/Town |
| Administrative Contact Person: | Address: | E-mail/Phone Contact |
| Supervisor Name: | Position/Title | E-mail/Phone Contact |

**Months/Years You Have Known the Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

My signature on this form confirms my commitment to provide supervision for the above named student for their work with us associated with the Department of Global Health administered Fellowship.

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Letter of Commitment: UW Faculty Mentor**

**Applicant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The purpose of the of our Department of Global Health administered fellowship awards are to promote global health by providing financial assistance to graduate/professional students or medical residents who would like to gain practical global health field experience in international or underserved community settings. In order to receive a DGH-administered Fellowship, students/residents need to demonstrate a commitment by *you* to provide academic mentorship and supervision while the student is in-country working with the host organization supervisor and colleagues. The University of Washington faculty mentor should provide guidance to connect the applicant’s activities to their academic program and career goals.

|  |  |  |
| --- | --- | --- |
| Faculty Mentor Name | UW School and Department | Title |
| Phone | Fax | E-mail |

**Months/Years You Have Known the Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relationship to Host Organization/Mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Months/Years Working with the Host Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Letter of Support:**

In 1 page, please outline details of the project or experience that you have discussed with the applicant and your role in working with them. Please also provide your assessment of the applicant for work abroad and the applicant’s academic ability, cultural competence, flexibility, openness and independence.

**Unofficial Transcript**

Submit your most recent unofficial transcript. Applicants should be in good academic standing. If needed, an application reviewer will reach out to you to learn more about your academic history.