## Interdisciplinary Palliative Care Education Funds **Education Funding Request**

Interdisciplinary Palliative Care Education Funds are available to provide financial support for quality palliative care education that will improve and change practice at the bedside for front line health care providers and volunteers within the WWI HIN.

A subsidy for registration fees is available for any individual attending an education event that supports evidenced-based, best practice guidelines and the Model to Guide Hospice Palliative Care. Subsidy funding will be provided to whomever paid the original registration costs (e.g., the individual or the employer).

Requests should be made prior to attendance and approval of subsidy funding is dependent on meeting general requirements and the availability of funds.

\*\*Please print if not using fillable form\*\*

Registrant Name La	ast F	irst	Application Date	
Address				
Telephone	Fax	E-mail		
Employer		Position		
Have you made arrangements for the time to attend?  Note: Approved funds will be held in your name until completion of the education event, if your plans change and you will not be attending, please advise Hospice of Waterloo Region as soon as possible so that funds can be re-allocated to other requests.				
Course Event Title, Description and Length: (attach flyer if available)				
Dates of Education I	Event			
In what ways do you see this education event helping to improve your practice?				
Amount	Education Event/Registration	Costs: X	=	
Requested	<b>Education Event/Registration</b>	Costs: X	=	
	Tota	al:	=	
<b>Note:</b> Maximum subsidy available is equal to the cost of the annual HPCO conference registration fee member rate				
Who will be reimbu	rsed? Registrant	Employer		

A signed copy of this form will be returned when approved. For reimbursements, please submit Final Claim Form with appropriate attachments, upon education event completion

Amt. Approved	Date
Signature	Title
Comments	
	Signature