



2024 BIF ANNUAL CONFERENCE SCHOLARSHIP APPLICATION FORM
Return Completed Application by April 1, 2024

PLEASE COMPLETE ONE FORM PER APPLICANT

Name _____

Address _____

City _____ State _____ Zip Code _____

Email _____ Phone _____

Check one: Are you a Survivor Are you a Family Member of a Survivor

Expenses that may be requested for partial funding:

(Check box if you are requesting)

- Conference registration (includes meals scheduled at Conference) - \$75
- Transportation expense to get to Conference – up to \$50 travel expense will be reimbursed after the conference – must supply receipts for gas, bus, train, airfare) **Note: you must live more than 50 miles away from Conference venue to request this funding.**
- Hotel expense – up to \$100 will be reimbursed after the Conference – must supply receipt for hotel stay either the night before the Conference (May 8) or night of the Conference Day (May 9) **Note: you must live more than 50 miles away from Conference venue to request this funding.**

Partial Scholarship Funding is being made available to those survivors and families who have limited income and are unable to pay the Conference Registration Fee or expenses to travel to/stay at the Conference location.

Please explain why you need this Partial Conference Scholarship _____



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How might you benefit from attending the Conference? _____

Would you be willing to be interviewed about your experience of attending the Conference? Yes No

Would you be interested in serving on a BIF Committee? Please check which Committee you are interested in serving on:

- Social Media/Website
- Support Groups
- Information and Referral
- Fundraising
- Advocacy
- Conference

Signature _____ Date _____

Complete this form on our website at

<https://www.braininjuryfl.org/event/brain-injury-florida-annual-conference/>

Or print, complete, scan,
and email to info@braininjuryfl.org by April 1, 2024

You will be notified if a Partial Scholarship is Awarded by April 15, 2024