



Choices for Advanced Training



2010

Pyott ARVO Travel Scholar Award

The Pan-American Association of Ophthalmology (PAAO) will award one (1) travel scholarships in 2010 in the amount of \$1,500, to a Latin American candidate, to attend the ARVO (Association for Research in Vision and Ophthalmology) annual meeting. This award is funded by the David & Julianna Pyott Foundation through the Pan-American Ophthalmological Foundation (PAOF).

The Pyott ARVO Travel Award is open to Spanish-speaking Latin American residents and fellows in ophthalmology under the age of 40 currently living in the Caribbean, Mexico, Central and South America who are committed to return to their country of origin and who will devote some time to charity clinics.

The candidate **must**:

- Be the lead/first author on an abstract submitted to ARVO that was accepted for presentation. This will be verified on ARVO's website.
- Be recommended by the ophthalmology department chairman or national ophthalmological society affiliated with the PAAO.
- Present a summary of his/her work at the Pan-American Research Day meeting, Renaissance Hotel, May 1, 2010, the day prior to the ARVO meeting in Fort Lauderdale.
- Present his/her work at the ARVO meeting, May 2-6, 2010, in Fort Lauderdale.
- Be a member of the PAAO at the time the travel award application is submitted.

The Selection Committee will review all abstracts on a blind basis, assigning points based on the merit of the abstract.



Pan-American Ophthalmological Foundation
2010 Pyott ARVO Travel Award (US\$1,500)
Application Form
Receipt Deadline: March 18, 2010

General Information

Requirements for Application:

- A. The applicant must be 40 years old or less.
- B. The applicant must be a Resident or Fellow.
- C. The candidate must be **lead/first** author on an **accepted** Paper or Poster scheduled for presentation at the 2010 ARVO meeting. A copy of the acceptance letter/email from ARVO or scheduling information should be included with the application.
- D. The candidate must be recommended to the PAAO by ophthalmology department chairmen or national ophthalmological societies affiliated with the PAAO (include two-page CV with your request for information). The letter should address the candidate's qualifications as well as confirm the candidate's status as a resident or fellow.
- E. The candidate must be a member of the PAAO at the time the application is submitted. Member-in-Training dues are \$50 for 2010. Please contact the PAAO Administrative Office to confirm your membership status.
- F. The candidate must present a summary of his/her accepted work at the Pan-American Research Day, Saturday, May 1, 2010, the day prior to the ARVO meeting, in Fort Lauderdale. No substitute presenters are permitted.
- G. Non appearance on May 1, 2010 will constitute a complete cancellation of the award.

Deadline for Application

The *receipt* deadline for the 2010 Pyott ARVO/PAAO Travel Award is March 18, 2010. **Return the completed application form and a 2 page CV by email to info@paa.org. Please note that the deadline will be strictly enforced.**

Award Payment Method

It is very important to include information if you would prefer to receive the funds via a US check or by a wire transfer. If this information is not received at the time of your application, it may be a reason for your application for the Travel Award to be excluded from consideration.

Pan-American Scholarship Policies and Awardee Responsibilities

1. The Awardee is responsible for obtaining the appropriate visa documentation, if applicable.
2. The Awardee understands that his or her name may appear in the PAOF newsletters or other promotional material to promote this program for future participants.
3. The Awardee assumes entire responsibility and hereby agrees to protect, indemnify, defend, and save the Pan-American Ophthalmological Foundation (PAOF) and the Pan-American Association of Ophthalmology (PAAO) and their employees and agents, harmless against all claims, losses and damages to persons or property, governmental charges, or fines and attorney's fees arising out of or caused by the Awardee's participation in any PAAO/PAOF Program.

In addition, the Awardee acknowledges that the PAOF and PAAO do not maintain insurance covering the Awardee's property or person and that it is the sole responsibility of the Awardee to obtain property damage, life and travel insurances covering such losses by the Awardee. Types of insurance needed while in the program may include (but are not limited to): personal medical insurance, malpractice insurance, auto insurance, renters insurance, travel insurance. The Awardee is responsible for all expenses incurred while in the program, e.g. payment of his or her own housing, food, insurance, medical bills, etc. The PAOF assumes no responsibility or liability for the accidental injury or death of the Awardee.

Contact with Pan-American Association Staff

The PAAO welcomes phone calls and or emails from applicants to clarify the PAAO's guidelines and application procedures. However, calls and or emails to discuss the details of pending scholarship applications are strongly discouraged.

Pan-American Association of Ophthalmology
1301 South Bowen Road, Suite 365, Arlington, Texas 76013 USA
Telephone: (817) 275-7553 **Fax:** (817) 275-3961 **Email:** paof@paa.org



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Type all Information

PAAO ID: _____ (please contact PAAO Office if you don't know your membership ID number)

Name of Applicant: _____
First Name, Middle Initial, Last Name (s)

Degree(s) _____
MD, PhD

Mailing Address: _____



Provide a small passport
style photograph

City: _____ **State/Province:** _____

Country: _____ **Zip:** _____

Office Phone: (____) _____ **Fax Number:** (____) _____

Home Phone: (____) _____ **Birth Date:** ____ / ____ / ____
mm dd yyyy

Email: _____ **Citizenship:** _____

ARVO Acceptance/Event code: _____

Title of work accepted for presentation at ARVO:

Abstract (same as appears on ARVO webpage)



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Reason for Applying for Scholarship. It must fit in this box and be typewritten.

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Membership in Professional or Honorary Societies, prizes, awards, fellowships, etc. (Omit if Included in CV)

List of Publications (Omit if Included in CV)

EMERGENCY CONTACT (someone other than the applicant: parent, spouse, etc.)

Last Name (s)		First Name	
Email Address		Relationship to applicant	
Permanent Home Address			
City	State/Province	Zip Code	Country
Telephone (home)	Telephone (work)	Fax number	

IMPORTANT! If awarded the Tyson ARVO Research Initiative Award, a check written on a US bank (JP Morgan Chase) will be presented at the conclusion of Saturday's Pan-American Research Day.

If you do not have a US bank account, there are several Check Cashing facilities in Fort Lauderdale. Check cashing facilities generally require two forms of identification and charge a fee to cash checks.



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APPLICANT ASSURANCE:

- I understand I must attach a current curriculum vitae (CV) with this application form with one (1) photograph.
- I understand that this is a one-time only scholarship award of US\$1,500 supported by the David & Juliana Pyott Foundation via the Pan-American Ophthalmological Foundation. I understand that if I have been awarded other scholarships from the Pan-American that I am not eligible to apply for this scholarship.
- I understand that I must be an Active Member or a Member-in-Training (if currently a resident or fellow, please attach a program letter) of the Pan-American Association of Ophthalmology.
- I understand that I will use the scholarship for the purpose of attending the 2010 ARVO meeting, May 2-6, 2010, in Fort Lauderdale, Florida. Otherwise the funds must be returned to the Pan-American Ophthalmological Foundation.
- I understand that I must present a summary of my work accepted to the 2010 ARVO meeting at the Pan-American Research Day, Saturday, May 1, 2010, in the Grand Ballroom of the Renaissance Hotel in Fort Lauderdale, Florida.
- I assume entire responsibility and hereby agree to protect, indemnify, defend, and save the Pan-American Ophthalmological Foundation (PAOF) and the Pan-American Association of Ophthalmology (PAAO) and their employees and agents, harmless against all claims, losses and damages to persons or property, governmental charges, or fines and attorney's fees arising out of or caused by my participation in the Pan-American *Pyott ARVO Travel Award* Program. In addition, I acknowledge and understand that the PAOF and PAAO do not obtain and maintain insurance and that it is my sole responsibility to obtain medical, malpractice, property, life, and travel insurances as deemed necessary by the fellowship program.
- I understand that I am obligated to return to my country of origin and submit a report and photographs on my activities during the scholarship stay to Dr. Juan Verdaguer, Chair, Fellowships Committee:

Juan Verdaguer MD, Chair, Fellowships Committee
Pan-American Ophthalmological Foundation
1301 South Bowen Road, Suite 365
Arlington, Texas 76013 USA
Tel.: 817.275.7553 Fax: 817.275.3961
Email: info@paa.org

APPLICANT AGREEMENT

I have read and accepted the above terms and responsibilities for a Pan-American *Pyott ARVO Travel Award* Program Scholarship. (A) I understand that noncompliance will be grounds for termination of the scholarship. (B) I understand that I am obligated to return to my country of origin and submit a report on my activities during the scholarship stay. (C) I further understand that I am obligated to be an Active Member or a Member-in-Training of the Pan-American Association of Ophthalmology at the time of my application. (D) I assume entire responsibility and hereby agree to protect, indemnify, defend, and save the Pan-American Ophthalmological Foundation (PAOF) and the Pan-American Association of Ophthalmology (PAAO) and their employees and agents, harmless against all claims, losses and damages to persons or property, governmental charges, or fines and attorney's fees arising out of or caused by my participation in the Pan-American *Pyott ARVO Travel Award* Program. (E) In addition, I acknowledge and understand that the PAOF and PAAO do not obtain and maintain insurance and that it is my sole responsibility to obtain medical, malpractice, property, life, and travel insurances as deemed necessary by the fellowship program.

Applicant's Signature: _____ **Date** _____

Disclaimer: Employees of the Pan-American Association of Ophthalmology (PAAO), Pan-American Ophthalmological Foundation (PAOF), members of the PAAO Executive Committee, members of the PAOF Board of Directors, their immediate family members and members of the same household, whether related or not, are not eligible to apply for scholarship/fellowship funding. All scholarships are subject to federal laws and regulations and are void where prohibited by law or regulation. Applicants agree to abide by the terms of these official rules and by decisions of the Review Committee which are final and binding on all matters pertaining to the scholarship/fellowship. The PAAO & PAOF reserve the right to disqualify any applicant that they determine, in their sole discretion, to be ineligible to participate in the scholarship/fellowship program. Individuals who have previously received scholarship/fellowship funding are ineligible to apply for additional scholarships/fellowships/funding.