

TAHQ Educational Grant Program Application

BIOGRAPHICAL INFORMATION

Name: _____

Preferred Address: _____

Title: _____

Current place of employment: _____

Daytime Phone: _____

Email: _____

If awarded the grant, applicant agrees to do one of the following within 1 year of receiving the grant: 1) Author an article of at least 500-words on a topic related to the conference, 2) Volunteer at the annual TAHQ conference, or 3) Present some aspect of knowledge learned at the conference to a TAHQ local affiliate meeting.

Signature

Date

TAHQ Educational Grant Program Application

PROFESSIONAL INFORMATION

1. Year joined TAHQ: _____

2. CPHQ certification number if applicable: _____

3. Are you a member of NAHQ? _____

4. Please describe your learning goals as they relate to healthcare quality:

5. Please describe your intended educational experience/program and how it will assist you to meet the state learning goals:

6. Please attach a copy of a current resume.

7. Amount requested: _____

8. To be used for:

Send form and all required documents to:TAHQ

P.O. Box 380708

San Antonio, Texas 78238