

Disaster Relief Grant Application

Veterinarians and Veterinary Students

**Purpose:**

The American Veterinary Medical Foundation (AVMF) Disaster Relief Grants are for the purpose of assisting veterinarians and veterinary students who have experienced an emergency need for necessities due to a natural disaster. The grants would cover items such as clothing, temporary housing, transportation, and meals that were needed immediately following a disaster.

The AVMF does not provide financial assistance for the repair or replacement of a personal dwelling or practice infrastructure, nor items that would normally be covered under the individual’s practice or homeowner’s insurance policies. These grants are intended to cover expenses incurred due to the emergency need for necessities and will not be approved to replace household or personal items. Grant funds also cannot be used to replace lost income.

**Grant amount:**

Up to $2,000 may be issued per grantee for out-of-pocket expenses incurred immediately following the disaster. A disaster would include, but is not limited to, flooding, earthquakes, tornadoes, hurricanes, wildfires, or oil spills in an area that has been declared a disaster area at the local, county, state, or federal level.

AVMF grants can cover the partial or actual cost of items purchased directly from a vendor. Modest housing costs may be covered for emergency temporary shelter. Copies of receipts or other approved documentation must be submitted along with the application form.

Limited funds are currently available and will be approved on a first come, first served basis for applications that meet eligibility criteria.

**Criteria for Eligibility:**

1. Must be an individual who is a current student at, or a graduate of, a veterinary medical school accredited by the AVMA Council on Education, or a veterinarian that currently holds or formerly held a valid license to practice veterinary medicine in any U.S. state or territory.
2. Must have incurred emergency expenses for necessities as a result of the disaster listed on the application, such as expenses related to food, bottled water, clothing, medication or medical supplies, toiletries, blankets, or temporary shelter.
3. Applicant may not have previously received any disaster relief grant from the AVMF for the same disaster.
4. Only one application may be submitted per veterinarian or student. If multiple veterinarians within the same practice have been impacted by the disaster, each must submit a separate application.

Current officers, directors, and employees of the AVMF or AVMA, and their spouses, dependent children and parents are not eligible to apply for or receive disaster grants under this program.

**Application Procedure:**

The application must be completed in its entirety with all supplemental materials attached and emailed to disastergrant@avma.org.

You will be contacted if your application is not complete. No decision will be reached on an application until all requested information has been received.

Applicants can request up to $2,000 in grant funds. Payment for approved grants will be made by direct deposit upon submission of banking information via AVMF’s secure, online portal.

**Application Approval:**

1. All Disaster Relief Grant for Veterinarians and Veterinary Student applications received by the AVMF will be reviewed and applicant will be notified within 30 days of application. Approved grantees will be provided with the link for submission of banking information at the time of approval.

1. Applications should include at least two digital photos of damaged property, if feasible.

The final decision regarding the number, timing, and amount of grants awarded under this program is solely within the discretion of the AVMF Board of Directors.

**Deadline:**

**Applications must be received no later than 9 months following the disaster**.

Direct your questions regarding the application to: disastergrant@avma.org.

**Applicant Information**

Name of Veterinarian/Student:

Home Address:

City:

State:

Zip:

Business Name:

Address:

City:

State:

Zip:

❒ Graduate from AVMA accredited veterinary school / licensure

❒ Student at AVMA accredited veterinary school / licensure

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Name of AVMA accredited veterinary school / licensure

Primary Email:

Primary Telephone:

Amount Requested (may not exceed $2,000):

Have you previously received any award from the AVMF? Yes No

If yes, please indicate type and date of award:

After completing the chart below, **please provide a one-page narrative explaining your losses because of the disaster.** (Include details as to how many family members were affected, a detailed list of items purchased, such as number of meals and hotel rooms required.)

**RELIEF CHART OF ITEMIZED EXPENSES**

Name: Date:

Please complete the chart below as part of your application. The AVMF will only cover expenses based on the information listed in the chart. You should use the actual cost of the items listed and not include any additional mark-ups.

**Please Note:** Excluded expenses are those related to the loss of the personal dwelling or veterinary hospital infrastructure.

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| --- | --- | --- | --- | --- | --- |
| **Description** | **# Days** | **# People** | **# Items** |  | **Total $** |
| Meals/Water |  |  |  |  |  |
| Housing |  |  |  |  |  |
| Clothing |  |  |  |  |  |
| Transportation |  |  |  |  |  |
|  Car Rental |  |  |  |  |  |
|  Public Transportation |  |  |  |  |  |
|  Other Transportation |  |  |  |  |  |
| Other (Please list) |  |  |  |  |  |
| Medicine/Medical Supplies |  |  |  |  |  |
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| Total Amount Requested |  |  |  |  |  |

Application checklist: Proposals should include:

1. Application form with chart of itemized expenses
2. 1-page narrative describing the disaster, how it deprived you of short-term access to basic personal necessities, and what your immediate needs are/were, and how you plan to use the grant funds (if you are still in the immediate aftermath of the disaster)
3. Receipts for all expenses for which you are seeking reimbursement
4. Minimum of two photos of damaged property

**Applicant Assurance:** By typing or signing my name below, I certify the statements herein are true, complete, and accurate to the best of my knowledge, and that I have a valid need for the funds. I am aware that any false, fictitious, or fraudulent statements or claims are grounds for an immediate refusal of my application and may subject me to criminal or civil liability. I agree to accept responsibility for providing any personal reports if a grant is awarded as a result of this application. I understand that the granting of emergency assistance is neither a right nor an entitlement and that the AVMF Board of Directors shall have the sole discretion to determine whether I qualify for assistance.

Name or description of disaster:

Was the incident declared a disaster by any level of government, including county, state or federal? Yes No

Signature

Date