AACVPR is proud to provide financial support to a program team that is committed to attending the 2019 World Heart Games in Hickory, North Carolina. This scholarship is intended for teams consisting of program staff and patients who will actively fundraise and raise support to offset the costs of attending this unique event. The scholarship may be used to help defray the costs of travel, lodging, and expenses to and from the event. Learn more about the World Heart Games online: [https://www.acsm.org/attend-connect/events-and-conferences/acsm-world-heart-games](https://urldefense.com/v3/__https%3A/www.acsm.org/attend-connect/events-and-conferences/acsm-world-heart-games__;!!Kv7QgGdTlhIaqSqT!f8SjATus727wTMmeb0ueK143dK-cqKeL5ae5o-KjmcQ5zSXikybWzvN6s51QSShFiJs06A$)

Application Steps (Online Application Available)

1. Provide a narrative on the benefits of participating in the World Heart Games. Include why you want to send a team to the World Heart Games, and explain how you plan to organize the team and fundraise (publically, privately, or from your institution/other organizations). Please limit your response to no more than 500 words.
2. Provide a separate narrative on the way your program supports your patients and has a positive impact on your patient population/community. Please limit your response to no more than 500 words.
3. Complete the application form found below.
4. Send all documents via email to aacvpr@aacvpr.org.

Applicants must be able and willing to send a team of staff and patients to **Lenoir-Rhyne University in** **Hickory, North Carolina** (1 hour from Charlotte) from **June 3-4, 2022** Scholarship applications will be reviewed and winners will be selected by the AACVPR Executive Committee/Awards Committee. Awards per team/program will not exceed USD $1,000.

**Deadline for submissions is March 4, 2022**

1. Your Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Your Email and Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Your title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Program Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Parent Facility/System (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Number of Program Staff (Full and Part-time): \_\_\_\_\_\_
7. Number of patients seen annually: \_\_\_\_\_\_
8. Is your program AACVPR-certified?
 Yes
 No
9. Are you or another staff person a current AACVPR Member?

 Yes
 No

9a. If you checked “yes”, please list the name(s) of the member(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Will your facility/organization pay for some or all of your costs (staff and patients) to attend this event?
 Yes
 No

10a. If the answer to the previous question is “yes,” check all that apply:
 My organization will pay for airfare
 My organization will pay for registration
 My organization will pay for lodging
 My organization will pay for food/miscellaneous expenses

1. How many staff members do you plan to send to the World Heart Games? \_\_\_\_\_\_\_
2. How many athletes do you plan to send to the World Heart Games? \_\_\_\_\_\_\_\_\_\_\_\_
3. Have you/has your program attended a World Heart Games before?
 Yes
 No