



Program:		Training Site:	
Name of Event Organizer:		Telephone:	E-mail:
Please indicate your role: <input type="checkbox"/> Resident Wellness Representative/Champion <input type="checkbox"/> Resident <input type="checkbox"/> Faculty <input type="checkbox"/> PAA			
TOTAL FUNDS REQUESTED*: \$			
* A maximum limit of \$500 per request.			
* Must provide itemized receipts and list of attendees for all eligible expenses.			
* Alcohol charges cannot be included in itemized receipts.			
WELLNESS EVENT SUMMARY			
Event Title:			
Event Date:		Event Time:	
Event Location:			
Primary Audience: <input type="checkbox"/> Residents <input type="checkbox"/> Faculty/Staff <input type="checkbox"/> Family/Guests <input type="checkbox"/> Other (<i>describe</i>): _____			
Please estimate the expected number of attendees:			
Resident Physicians: _____		Non-Resident Physicians: _____	
Have you discussed this event with your Program/Site Director? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Have you applied for funding through other Sources such as SMA, RIHC, SaskDocs, etc.? _____			
BRIEF DESCRIPTION OF EVENT (Please indicate the purpose, goals, impact on resident wellness of this event)			

Please submit your application via email to Chastin Miller: chastin.miller@usask.ca

X

Signature of the Event Organizer

APPLICATION DETAILS:

- Total budget allocated for this initiative is **\$ 5,000** per academic year (\$500 for each program/site).
- Events with meals should follow the U of S meal per diem amounts: **Breakfast - \$10.00, Lunch - \$18.00, Dinner - \$23.00**
- Requests must be submitted 4 weeks in advance.
- Participants may include faculty, staff, and family members.
- Approved events include paint nights, bowling, escape rooms, meals. All events will be considered but are subject to risk management approval.
- All funding requests will be reviewed by the Resident Wellness Coordinator and PGME Manager.
- Priority will be given to applications that have not received funding for that academic year.
- **Reimbursement will only be made for pre-approved expenditures.** Please discuss your request with the Resident Resource Office as you begin to plan your event. Our Resource Office will also be able to provide suggestions for wellness activities or could assist in planning your event.
- A post-event report along with the original, itemized receipts for all eligible expenses as well as an attendee list **must** be submitted for reimbursement. **Meal claims must exclude any charge for alcohol.**
- Your brief post-event report may include a summary of what worked well and suggestions for improvements (No more than 100 Characters). Participants are strongly encouraged to submit photographs as part of their event summary report. RRO may share your event photographs through PGME social media, reporting, and/or communications.

For questions contact: Chastin Miller, Clerical Support, Resident Wellness
Phone: 306-966-5557 E-mail: chastin.miller@usask.ca

PGME Use Only:

Application received on:

Application reviewed by:

Funding Approved: Yes No

Comments: