

# CAPF/API/McKesson Informatics Award

## Application Form

Please complete this form and mail with required documentation to address listed below.

<b>Name:</b>	<input type="text"/>		
<b>Social Security Number:</b>	<input type="text"/>		
<b>Address:</b>	<input type="text"/>		
<b>Address:</b>	<input type="text"/>		
<b>City:</b>	<input type="text"/>		
<b>State:</b>	<input type="text"/>	<b>Zip code:</b>	<input type="text"/>
<b>Daytime Telephone Number:</b>	<input type="text"/>		
<b>Alternate Telephone Number:</b>	<input type="text"/>		
<b>Fax:</b>	<input type="text"/>		
<b>Email:</b>	<input type="text"/>		
<b>Training Institution:</b>	<input type="text"/>		
<b>Institution Address:</b>	<input type="text"/>		
<b>Start Date of Pathology Residency:</b>	<input type="text"/>		
<b>Anticipated Completion Date of Pathology Residency:</b>	<input type="text"/>		
<b>Fellowship Dates:</b>	<input type="text"/>		
<b>Residency Program Director:</b>	<input type="text"/>		

We are aware that the applicant wants to attend the conference checked below and we agree to authorize permission to attend if the award is granted.

<b>Signature:</b>	<input type="text"/>
<b>Date:</b>	<input type="text"/>
<b>Print Name:</b>	<input type="text"/>
<b>Title:</b>	<input type="text"/>

---

Applicants must submit a:

- completed application form
- narrative summary

- curriculum vitae
- supporting letters

Please attach supporting documentation and submit together with application in one envelope and send to:

CAP FOUNDATION  
Attn: CAPF/API/McKesson Informatics Award  
325 Waukegan Road  
Northfield, Illinois 60093-2750

For more information about these awards, please contact the CAP FOUNDATION at [CAPfdn@cap.org](mailto:CAPfdn@cap.org) or 800-323-4040, extension 7324 (in Illinois, 847-832-7324).