**Supporting Excellence in Dietetics Mentorship - Preceptor Continuing Education Fund Request**

The leading edge and evidence-based training that our partner sites and preceptors make available to our students is a defining quality of the UW Graduate Coordinated Program in Dietetics.

To support continued development, preceptors are eligible to request funding to support educational activities that will enhance the knowledge and skills that they share with our students. Up to $250 may be approved to assist with costs for conference registration, training materials, or certain travel costs associated with the continuing education event. Reimbursement of expenses will be processed following completion of the CE activity.

To receive funds, recipients must demonstrate ongoing engagement with the UW GCPD. Examples of engagement include serving as a primary preceptor for at least two UW GCPD interns within the previous two years or guest lectures in GCPD courses. If requests exceed available funds, preceptors who have not received funds in the last 3 years will receive priority.

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| **Name:** |  | **Email:** |  |
| **Title:** |  | **Organization:** |  |
| **Supervisor’s Name:** |  | **Supervisor’s Email:** |  |
| **Please provide a brief description of current or recent engagement with GCPD students** (Examples: number of times you have precepted a UW dietetic intern for a >3 week rotation in the past 2 years or lectures provided) | | | |
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| **Conference/workshop you wish to attend:** | | | |
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| **Conference website or brochure link:** |  | **Event Date(s):** |  |
| **How do you anticipate this activity will contribute to your student mentorship activities (updated or new areas of knowledge, new skills, etc.)?** | | | |
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| **How do you plan to apply the GCPD continuing education funding?\*** | | | |
| Registration fee: |  | | |
| Estimated travel cost(s): |  | | |
| Other: |  | | |
| *\* Up to $250 will be reimbursed for your registration, travel, or other approved expenses with receipts. If requesting reimbursement for mileage, please include starting address and the event address.* | | | |
| **Will you receive reimbursement from another source for this activity/travel? Please note the source and how you plan to split the expenses.** *.* | | | |
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| **Non-UW Employees - Address to mail reimbursement:**  *Current UW employees will be reimbursed through direct deposit.* | | | |
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**Please submit this form and your current resume or CV to:**Anne Lund, MPH, RDN, FAND; Director, Graduate Coordinated Program in Dietetics  
206.221.4920, [AEL4@uw.edu](mailto:AEL4@uw.edu)