The Cornell MPH Program can help offset *reimbursable* costs of housing, travel, and/or commuting for ***unpaid*** Applied Practice Experiences only. Funds will be allocated based on available funds, overall costs, and student fiscal need. APE funding is limited. Funding requests will be received and considered on a rolling basis. An approved Applied Project Work Plan is expected, in order to be eligible for funds. Submit this funding form to Audrey Baker at [azb4@cornell.edu](mailto:azb4@cornell.edu).

1. **Apply for the** Einhorn Center’s [Serve in Place Fund](https://oei.cornell.edu/grant/serve-in-place-fund/), if available [***Summer project applications due mid-March***]
2. **Apply for MPH program funds** [limited based on need and available budget]:

* **MPH Funds for Unpaid Applied Practice Projects (Winter or Summer)**: Students are eligible for reimbursement for a total of up to $500 for winter expenses, or up to $1,250 for summer expenses, for unpaid projects only.
  + **In the Winter, this includes a “base fund” of $250 per unpaid project, plus up to *one* additional $250 fund (see categories below).**
  + **In the Summer, this includes a “base fund” of $750 per unpaid project, plus up to *two* additional $250 funds (see categories below).**
  + ***Note: Due to limited availability of funds, students are only eligible once for APE funding (ie. cannot receive MPH funding for both a winter and a summer project, and cannot be funded for two different unpaid projects).***
* **MPH Funding Categories: In addition to base funds, s**tudents are eligible for reimbursement of $250 for each applicable category below (up to one in winter, and up to two in summer), for *unpaid* projects:
  + **Public Health Workforce Capacity Fund: Projects in collaboration with** Cooperative Extension or Departments of Health
  + **New York State Capacity Fund: Projects that support public health in NYS (urban *or* rural)**
  + **Rural Community Fund:** Projects that support the public health of rural communities (NYS *or* other U.S.) *[please justify below]*
  + **Equity Impact Fund:** Projects that support and further public health equity *[please justify below]*
  + **Sustainability Impact Fund:** Projects that support and further environmental sustainability and public health *[please justify below]*

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| --- | --- |
| **Name** |  |
| **Email** |  |

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| **Applied Practice Experience** | |
| Project Title |  |
| Host Organization |  |
| Site Supervisor |  |
| Project Dates |  |
| *Short* Budget Narrative & Justification (how funds will be used) | * *How will the funds listed below be spent, and how will they influence your learning and career goals, as well as impact public health? You may refer to your APE Work Plan. Be specific about your budget (see budget template below).* |

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| **Funding Application Checklist: *Please check all that apply*** | X |
| My Applied Practice Experience is ***unpaid*** by the host organization [required] |  |
| I have met with an APE Site Supervisor to discuss a Work Plan [required] |  |
| I have submitted an APE Work Plan to the MPH office [expected] |  |
| I have applied for the Office of Engaged Initiatives [Serve in Place Fund](https://oei.cornell.edu/grant/serve-in-place-fund/) [expected] |  |
| I am applying for Winter APE Base Funding (up to $250)\* |  |
| I am applying for Summer APE Base Funding (up to $750)\* |  |
| **In addition to base funds, select up to one [winter] or two [summer] of the following relevant categories:** | |
| I am applying for the Public Health Workforce Capacity Fund w. CCE or DoH (up to $250 additional) |  |
| I am applying for the NYS Capacity Fund (up to $250 additional) |  |
| I am applying for the Rural Community Fund (up to $250 additional)—*Justify Below* |  |
| I am applying for the Equity Impact Fund (up to $250 additional)—*Justify Below* |  |
| I am applying for the Sustainability Impact Fund (up to $250 additional)—*Justify Below* |  |

***\**** *Students may only apply for either Winter or Summer APE Funding.   
Employee degree program (EDP) student are not eligible for Winter or Summer APE Funding.*

**Budget Estimate –   
NOTE: All funds granted must be REIMBURSED VIA RECEIPT SUBMISSION (ie. housing/rent, travel costs)**

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| **Reimbursable Expenses** | **Total Cost** | **Time Frame** | **Notes (if relevant)** |
| Accommodation/Housing |  |  |  |
| Commuting or Travel |  |  |  |
| Visa fees |  |  |  |
| Immunization costs |  |  |  |
| Other (reimbursable) |  |  |  |
| **Sub-Total** |  |  |  |
| **Other Income** | **Total Income** | **Time Frame** | **Notes (if relevant)** |
| APE stipend or wages [may not be eligible for MPH funding] | *If relevant, for paid APE projects* |  |  |
| Other Grant/Award  (ie. OEI Serve in Place) | *Awarded  (or Pending)* |  |  |
| Other |  |  |  |
| **Sub-Total** |  |  |  |

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| --- | --- | --- | --- |
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| **Total MPH Budget Request** (Reimbursable Expenses *with receipts,* minus Income): | | | |
| Winter or Summer APE Funding (up to $250 or $750) |  |  | *Must be unpaid project (EDP students not eligible)* |
| Public Health Workforce Capacity Fund (up to $250 additional) |  |  | *Must be a project with CCE or DoH* |
| NYS Capacity Fund (up to $250 additional) |  |  | *Must be a project focused on NYS public health impact* |
| Rural Community Fund (up to $250 additional)\*\* |  |  | *Must support the public health of rural community/communities—justify below\*\** |
| Equity Impact Fund (up to $250 additional)\*\* |  |  | *Must support public health equity—justify below \*\** |
| Sustainability Impact Fund (up to $250 additional)\*\* |  |  | *Must support environmental sustainability and public health—justify below\*\** |
| **Total MPH Request** |  |  |  |

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| **\*\*Rural Community Funding Justification** |
| If you are requesting additional funding because your APE project supports the public health of a rural community or communities, please justify below in 2-3 sentences. Why do you define the population(s) impacted by your project as a rural community? What evidence supports this? You are encouraged to link to the Census or other site to support your claims. |
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| **\*\*Equity Impact Funding Justification** |
| If you are requesting additional funding because your APE project supports public health equity, please justify below in 2-3 sentences. Why do you define your public health work as impacting equity? What population will see an impact? What aspects of equity/equity impacts will your project address in this population/s? What evidence supports your claims? |
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| **\*\*Sustainability Impact Funding Justification** |
| If you are requesting additional funding because your APE project supports environmental sustainability and public health, please justify below in 2-3 sentences. Why do you define your public health work as influencing environmental sustainability? What population will see an impact? What aspects of environmental sustainability will your project address in this population/s? What evidence supports your claims? |
|  |