



Missouri Kidney Program

University of Missouri

Hartman Education Award Application

Application Deadline January 1, 2022

Single Point of Contact (SPOC): _____

Facility: _____

Facility Address: _____

SPOC Phone Number: _____ SPOC Email Address: _____

Grant Request Amount: \$ _____
(Not to exceed \$500 per facility)

Expected Project Dates:

From: _____ To: _____

***All expenses must be submitted by April 30, 2022**

Estimated itemized expenses for reimbursement: _____

Project Description, Focus Area(s), Anticipated Outcomes (please see award announcement for program expectations)

If you need additional space, use separate page(s)

Statement of Compliance: On behalf of my facility, and in my professional capacity, I agree to

- 1) provide MoKP with a project report that can be shared as a best practice on the MoKP website **by May 30, 2022**
- 2) use the funds to educate dialysis patients
- 3) recognize MoKP as a funding sponsor on any publications, posters and educational materials developed using MoKP reimbursement funds, and
- 4) ensure the project report will include a description of project, outcomes measured, summary of outcomes/results, impact on patients, and lessons learned.

Signature: _____ Date: _____

Send to: umhsmokpinfo@health.missouri.edu or FAX – 573-882-0167.