

**OMeGA Medical Grants Association  
Fellowship help guide with screen shots (01/12/11)**

**Table of contents**

**General Hints**.....2

**Start early**

- One person at one time
- Judicious uploading
- Answer the question asked
- Inputting information
- One contact person per program
- 2011-2013 academic year schedule
- Qualified applicants
- Fellows or residents cannot apply for a grant directly
- Apply for all possible grants
- Help bubbles

**Technical support**.....3

- Profile changes
- Forgotten username and/or password
- Browser issue
- Unable to register
- Not receiving e-mail notifications
- Common reasons why you may be unable to log in
- If you are still having difficulty

**Registration**.....4

**New User**

- Compliance
- Organization information
- Tax information – W-9, W8BEN, 501(c)3
- Contact information
- ACGME-accreditation
- Upload and submit
- Current user

**Paying the application fee**.....6

- If the program or program director has an AOA ID and password
- If the program or program director does not have an AOA ID and password
- Number of applications a program or institution may submit
- Grant Management System application payment update

**Application process**.....9

- Organization
- Program overview
- Budget overview
- Program details
- Payee information
- Program budget
  - Covered expenses
  - Non-covered expenses
- Supporting documents
  - Uploads
  - After you have submitted your application

**Grants – after the decision**.....17

## **General hints**

### **Start early**

If other people are providing information to you for the application, give them deadlines that allow you time to put it all together. If your grants office is an integral part of this process, ensure there is enough time for them to review and approve the application by OMeGA's deadline.

### **One person at one time**

Multiple people working on the same application at the same time may cause system errors and the information may not save correctly.

### **Judicious uploading**

Do not upload brochures, PowerPoint presentations or other pieces that were created for another use.

### **Answer the question asked**

First and foremost, provide the information requested. Be concise: there are character limits in most text fields and an error message will appear if the character limit is exceeded.

### **Inputting information**

You may find it easiest to prepare all information in a separate document, then cut and paste into the boxes once all your information is together.

### **One contact person per program**

If this person will be away for an extended period during the application and review period, go into your profile and change the contact information so we can easily contact your program with any questions that may arise.

### **2011-2013 academic year schedule**

Application period opens – Wednesday, October 20, 2010

Application period closes – Friday, January 21, 2011, 5pm CST

Fellowship recipients notified – Tuesday, March 8, 2011

Public announcement of grant recipients – Thursday, March 24, 2011

### **Qualified applicants**

Programs in the Americas may apply for a grant with OMeGA. Applications, attachments and subsequent reports must be submitted in English. Accredited or non-accredited programs may apply.


### **Fellows cannot apply for a grant directly**

They may assist their programs to accumulate data needed for the grant application.

### **Apply for all possible grants**

We encourage your program to apply for all available grants since there are no guarantees that your program will be awarded a grant from any one organization. However, you may not "double dip": your program must decline the OMeGA grant if all your costs are covered by other sources including another grant.

### **Help bubbles**

While filling out the application online, there are "help" bubbles on the right side of the application that provide helpful information or character limits. Place the cursor over the question mark icons (  ) for a description of that field.

## Technical support

### Profile changes

Click on the **Profile** button at the top right of the screen to correct your program information. Follow the prompts to make changes. You will not be able to change all screens; contact OMeGA at [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org) to revise sections you cannot change on your own.

### Forgotten username/password

If you cannot remember your username, click on “forgot username” to have your username sent to the e-mail address given as the contact. If you forgot your password, click on “forgot password” and the system will automatically send a temporary password to the e-mail address provided. Follow the directions in the e-mail to change the password. If you are still having difficulty, contact OMeGA at [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org).

### Browser issue

If your browser is not functioning, try resetting your privacy and security settings to “medium” or “low” and delete all cookies in your browser.

1. In the browser, click on “Tools” and select “Internet Options.”
2. Select the Security Tab and click on the “Internet” icon.
3. Click on the “Default level” button to set the “Security level for this zone” to “Medium” or “Low.”
4. Click on the Privacy tab.
5. Click on the “Default” button to set privacy to “Medium”.
6. Click on the “Apply” button.
7. Click on the “Okay” button to close the “Internet Options” dialog box.
8. Click on the General tab and click on the “Delete Cookies” button.
9. Click “Okay” on “Delete all cookies in the Temporary Internet Files Folder” pop-up.
10. Repeat above steps to Delete Temporary Internet Files and Clear History.
11. Click on the “Okay” button to close the “Internet Options” dialog box.
12. Close and restart your browser for these changes to take effect.

### Unable to register

There are two reasons why you may be unable to register.

1. Some of the information entered as part of your registration was not valid. Please see the error message and re-enter corrected information.
2. You entered an e-mail address or username during your registration that has already been used in the OMeGA Grants Management System. Please choose a different username or e-mail address.
  - If you have registered previously, please request that your username be e-mailed to you (see “Forgotten Username or Password” above for details).
  - If you have not registered previously, please contact OMeGA at [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org).

### Not receiving e-mail notifications

If you are not receiving the e-mail notifications that the OMeGA GMS automatically sends out:

1. Check SPAM and/or Junk e-mail folders – once located, right-click on the e-mail and select the option under “Junk E-mail” to “Add Sender’s Domain to Safe Senders list.”
2. Alternatively, you can manually add [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org) to the safe senders list by taking these steps:
  - Click on Actions, then locate the “Junk E-mail Options”

- Click on the tab for "Safe Senders"
- Click "Add," type in [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org) and click "OK"

**Common reasons why you may be unable to log in**

1. Your program’s account has been temporarily disabled due to repeated unsuccessful attempts to log in. Please wait 30 minutes before you try to log in again.
2. Your program’s account may have been disabled due to inactivity. Please contact OMeGA at [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org) and request that your account be reactivated.

**If you are still having difficulty**

E-mail [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org) for assistance. Please state your issue clearly, including screen shots, if helpful, as visual aids.

**Registration**

**New user**

Click on the "Register" button to begin.

**Compliance**

Read the compliance agreement and click "I agree," then click "Submit." If your program or institution does not agree with the Compliance Commitment, you will not be able to register and apply for an OMeGA grant. By clicking "Submit," you will be directed to the Profile Registration page to enter contact information and choose a username and password.

**Organization information**

**All required fields on the registration form must be completed to successfully register**

The screenshot shows the OMeGA registration form with several callouts:
 

- A red asterisk next to the "Organization legal name" field is highlighted with a callout: "The red asterisk denotes a required field. All required fields must be entered in order to successfully register."
- A tooltip over the "If other, please describe:" dropdown says: "Move mouse over here to view a description of the item."
- A callout points to the "E-mail" field: "E-mail address must be current and correct. The system uses e-mail as a primary source of communication and it is important to enter the correct e-mail address."
- A callout points to the "Username" and "Password" fields: "Select a Username and Password that fits the formatting guidelines provided."
- Another callout points to the "Tax status" dropdown: "Provides hints to certain fields."

Organization legal name – Enter the organization’s legal name as registered with the Internal Revenue Service and as it appears on the W9/W8BEN form. Do not use abbreviations or acronyms.

Valid characters:

1. Upper and lower case alphabetic characters (a through z, A through Z)
2. All numeric characters (0 through 9)

3. Comma (,), Period (.), Apostrophe (’), Ampersand (&), Space, Hyphen (-), Colon (:)

Organization type – Choose the appropriate organization type from the drop-down menu. If none are correct, describe in the text box below.

Follow these steps if you are applying from a country other than the U.S.:

1. Add organization name as it is shown on the country’s tax/legal documents.
2. Input 00-0000000 as the tax ID number.
3. Upload the equivalent tax form for the country in the section labeled “W9.”
4. Country codes are included after the state codes. If the country code is not listed, please e-mail OMeGA at [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org) and the code will be added.
5. The zip code line accepts letters as well as numbers to accommodate zip codes from all countries in the Americas.

### **Tax information – W-9, W8BEN, 501(c)(3)**

Tax status – Choose the appropriate Federal tax status of the organization from the dropdown menu.

Tax ID – Enter the Federal Employer Identification Number (FEIN) assigned by the Internal Revenue Service. OMeGA Medical Grants Association does not accept applications from individuals without ties to an organization recognized by the IRS (or the corresponding federal agency from non-US countries).

Upload the organization’s signed form.

### **Contact information**

Complete all fields so we can best communicate with your program.

The username can include:

1. Upper and lower case alphabetic characters (a through z, A through Z)
2. All numeric characters (0 through 9)

The password must be 8–12 characters and must include at least one upper-case character, one lower-case character and one symbol.

### **ACGME- accreditation**

Indicate whether your program is ACGME-accredited.

If your program is Canadian, check this box if your program is ACGME-accredited or accredited by the Royal College of Physicians & Surgeons. Central and South American programs should check this box if they are accredited by their country-specific accrediting organizations.

Lack of accreditation is not a negative strike for your application; we recognize that accreditation is not available in several sub-specialty categories or that programs need funds to get accredited.

### **Upload and submit**

Once all the fields are complete, click the “Upload & Submit” button to complete the registration process. If the registration is accepted, you will be taken to a confirmation page. If the registration is not accepted, you will be directed to contact OMeGA.

Once at the confirmation page, click “Home” to be directed to the program’s Home Page.

### **Current user**

Log in with the username and password used in the past. Click on the links “forgot username” and “forgot password” for the GMS to automatically send them to you.

Please check the program’s profile on the top bar in the top right of the screen. If any of this information is incorrect, click on the profile button to be directed to the profile page to make changes. When complete, click on “My Grants” and return to the welcome page of the GMS.

## Paying the application fee

There is a \$25 fee for each application.

### Number of fellowship applications a program or institution may submit

An institution or program may apply for one fellowship grant (up to \$150,000) in each of the sub-specialty categories listed below:

- Adult Reconstruction
- Foot and Ankle
- Hand and Upper Extremity
- Orthopaedic Oncology
- Orthopaedic Sports Medicine
- Pediatric Orthopaedics
- Shoulder and Elbow
- Spine (Orthopaedic and orthopaedic/neurosurgery programs)
- Trauma

### If the program or program director has an AOA ID and password

1. Click on “Pay application fee” to be directed to the AOA Online Store.
2. Click on the bold “OMeGA Medical Grants application fee.”

**Clicking on the ‘Pay Application Fee’ button will take the requestor through the AOA payment process**

The screenshot shows the AOA Online Store interface. At the top, there is a navigation bar with the AOA logo and several menu items: ABOUT AOA, MEMBERSHIP, LEADERSHIP, ACADEMIC LEADERSHIP, ANNUAL MEETING, FELLOWSHIPS & AWARDS, CRITICAL ISSUES, and EMERGING LEADERS. Below this, there are two tabs: "Events" and "My Account". The main content area is divided into "Categories" and "Products". Under "Categories", there is a link for "OMeGA Medical Grants". Under "Products", there is a table with two columns: "Product" and "Price". The table contains one row: "OMeGA Medical Grants Application Fee" with a price of "25.00". A red box highlights this row. A blue callout box with a white background and a blue border points to the product name, containing the text: "Clicking on the 'OMeGA Medical Grants Application Fee' link will take you through the process of purchasing requests." At the bottom of the page, there is a footer with links: "About AOA | Membership | Leadership | Academic Leadership | Annual Meeting | Fellowships | Awards | Emerging Leaders | Press Kit | Contact Us" and "AOA Terms of Use".

Product	Price
<b>OMeGA Medical Grants Application Fee</b>	25.00

Clicking on the 'OMeGA Medical Grants Application Fee' link will take you through the process of purchasing requests.

About AOA | Membership | Leadership | Academic Leadership | Annual Meeting | Fellowships | Awards | Emerging Leaders | Press Kit | Contact Us  
AOA Terms of Use

3. Enter the quantity of applications. Click “Add to cart.”

## Select number of applications to be purchased

The screenshot shows the AOA website's product page for 'OMeGA Medical Grants Application Fee'. The page layout includes a top navigation bar with categories like 'ABOUT AOA', 'MEMBERSHIP', 'LEADERSHIP', 'ACADEMIC LEADERSHIP', 'ANNUAL MEETING', 'FELLOWSHIPS & AWARDS', 'CRITICAL ISSUES', and 'EMERGING LEADERS'. Below this is a search and cart sidebar. The main content area has a 'Categories' sidebar and a 'Product Details' section. The 'Product Details' section shows the product name, price (25.00), and a quantity input field set to 5. A callout box points to the quantity field with the text 'Select number of applications to be purchased.' Below the product details is an 'Add To Cart' button. At the bottom of the page, there is a footer with navigation links and 'AOA Terms of Use'.

- 10 -

## Confirm applications purchased and price then checkout

The screenshot shows the AOA website's shopping cart page. The page layout is similar to the previous screenshot. The 'Shopping Cart' section is highlighted, showing a table with the following data:

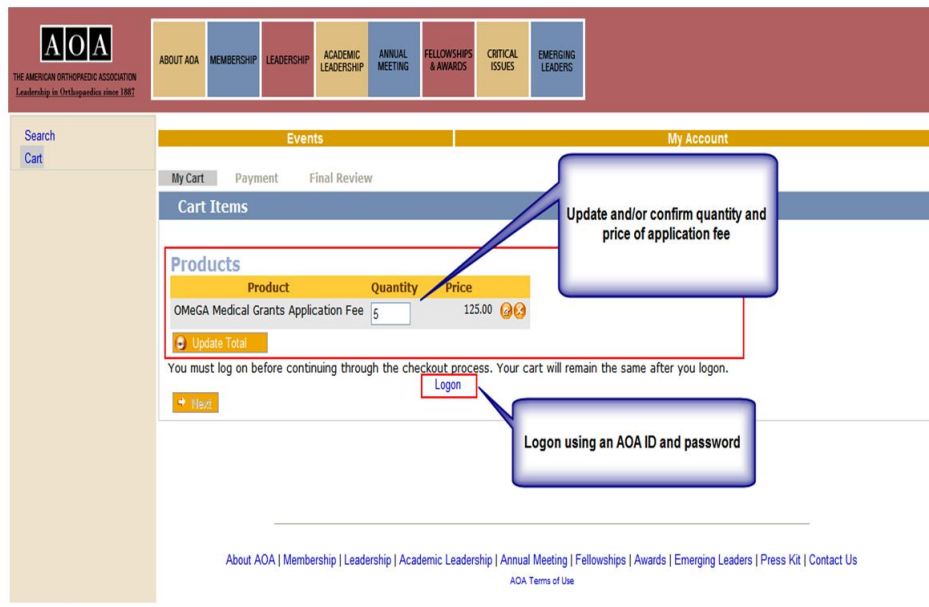
Products	Price
OMeGA Medical Grants Application Fee (5)	125.00

Below the table is a 'Checkout' button. A callout box points to the cart item with the text 'Confirm number of requests purchased and total price.' Another callout box points to the 'Checkout' button with the text 'Once confirmed, check out for final steps.' The footer of the page is also visible.

- 11 -

4. Log on and enter the AOA ID and password.
5. Confirm e-mail is correct.

**Confirm quantity and price of application fee and logon to the AOA payment system using an AOA ID and password to complete the payment process**



6. Enter the credit card information.
7. Proceed to payment.

**If the program or program director does not have an AOA ID and password**

1. E-mail [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org) with
  - a. Program director's name
  - b. Title
  - c. Company
  - d. Address
  - e. Phone and fax
  - f. E-mail address

The AOA ID and password will be e-mailed to you within 2 business days.

2. Click on the "Pay application fee" to be directed to the AOA Online Store.
3. Click on the bolded "OMeGA Medical Grants application fee."
4. Enter the quantity of applications.
5. Log on and enter the AOA ID and password.
6. Confirm e-mail is correct.
7. Enter the credit card information.
8. Proceed to payment.

**Grant Management System payment update**

The Grant Management System will be updated within 1 business day with your Fellowship application payment. You will not be able to proceed until your payment is reflected.

## Fellowship application process

This information is provided to help you complete the application. The following section lists the application questions as you will see them.

The screenshot shows a web browser window displaying the OMeGA Medical Grants Association website. The page is titled "GMS Grant Request Form - Program Information". The OMeGA logo is visible in the top left corner. The page has a navigation bar with links for "OMeGA Homepage", "Profile", and "Log out". Below the navigation bar, there is a progress indicator with five steps: "Instructions", "General Information", "Budget", "Supporting Documents", and "Submit". The "General Information" step is currently active. The form is divided into several sections: "Organization", "Program Overview", and "Budget Overview". The "Organization" section contains fields for "Organization legal name", "Contact name", "Contact email address", "Contact phone number", "Address", "City", "State", "Zip code", "Tax status", "Federal tax id number", and "Fax". The "Program Overview" section contains fields for "Sub-specialty", "Fellowship title", "Program start date", and "Program end date". The "Budget Overview" section contains fields for "What is the total amount needed for your program?", "What amount are you requesting from OMeGA?", and "Are you or will you apply for other grants to support this program?".

### Organization

This section has been populated from the profile information. Ensure all information is correct. If it is not correct, click on the profile link in the upper right of the page and update. (See *Current user* above.)

### Program overview

**Sub-specialty** – choose from the sub-specialty options in the dropdown box.

**Fellowship title** – the title of the institution's program (if you receive a grant, this title will be used for publication).

**Program start and end date** – these are the dates of your program (08/01/2011 – 07/31/2013). All grant requests are based on the academic calendar, starting in August and ending in July of the following year.

**Budget Overview**

\* What is the total amount needed for your program? \$ [input] ?

\* What amount are you requesting from OMeGA? \$ [input] ?

\* Are you or will you apply for other grants to support this program?  Yes  No ?

Please note that you will be required to provide additional budget details later in this grant request.

Amounts greater than \$20,000 will be sequenced with key milestones in the stated educational process. OMeGA views milestones as a positive grant review attribute because it conveys an organization structure consistent with the level of support typically required to execute the grant. If you are applying for a grant over \$20,000, please enter the milestone dates, the corresponding payment amount, and a brief description of what will have been accomplished by each date. You will have the opportunity to upload supporting documentation on the next page. Milestone payment terms may be changed in the review/approval process.

	Date	Amount	Description
* Milestone payment 1	Upon signing the LOA	[input]	[input]
Milestone payment 2	[input]	[input]	[input]
Milestone payment 3	[input]	[input]	[input]
Milestone payment 4	[input]	[input]	[input]
Milestone payment 5	[input]	[input]	[input]
Total:		\$0.00	

Add New Row Save

Note: Click the Save button to save milestone payment information

**Program Details**

\* Briefly describe your program. [input]

### Budget overview

**What is the amount needed for your program?** – This is the total amount that it will take for the program to support the fellow; you are not limited to \$150,000 in this question. Please be accurate: the answers to this question will help us set grant amount maximums in the future and speak to donors about the continuing need for donations.

**What amount are you requesting from OMeGA?** The maximum amount currently is \$150,000.

**Are you applying or will you apply for other grants to support this program?** Yes/No This information can support the need for future donations.

**Milestone payment 1 (Upon signing the LOA, but not before 8/01/11)** – 25% of the total amount requested (up to \$150,000) and description of how funds will be used.

**Milestone payment 2** – date 2/1/12, 20% of the total amount and how funds will be used.

**Milestone payment 3** – date 8/15/12, 25% of the total amount and how funds will be used.

**Milestone payment 4** – date 2/1/13, 25% of the total amount and how funds will be used.

**Milestone payment 5** – date 8/15/13, 5% of the total amount and how funds will be used and receipt of the final report.

**Click “save”** (You will not be able to advance without saving this section.)

### *Program details*

***Briefly describe your organization.*** 1500 character limit.

***Is your fellowship accredited?*** Yes/No Bubble indicates that accreditation is not required to apply for an OMeGA grant.

***If so, what is the accrediting organization and how many years of accreditation was your program granted?*** List the accrediting body (ACGME, Royal College of Surgeons, American Osteopathic Association) and how many years you received at your last accreditation.

***Will your fellowship program participate in the program match process?*** Yes/No.

***Provide name of your program director.*** Provide the fellowship director's name and upload a one-page CV. Faculty CV

***In which location does your fellowship program occur?*** Indicate location, city and state.

***Briefly describe the resources and facilities that will be used by your fellow(s) that are unique to sub-specialty needs.*** 1500 character limit.

***How many orthopaedic sub-specialist FTEs teach in the fellowship?*** Indicate the number of full time faculty and upload a one-page CV Faculty CV

***How many fellows do you anticipate appointing to your program in the sub-specialty selected in the upcoming academic year?*** Provide the total number of fellows you will have in your program in the upcoming year (this might be the NRMP/San Francisco Match quota).

**How many fellows in the sub-specialty selected have been in your program in the past three years?** Provide a total number and use the attached form to list your former fellows. Former fellows

**Patient population associated with fellowship program (please provide percent of population in each category).** Provide percentage in each category, ensuring the numbers add up to 100%. You might get this information from the clinic where the fellow works or from the physician’s office.

**How many women fellows have been in your program in the past 5 years?** Indicate number.

**How many under-represented minority fellows have been in your program in the past 5 years?** Indicate number.

**Highlight the criteria you will use to measure the success of the fellowship program.** 1500 character limit.

**Describe how your program maintains an environment of inquiry as evidenced by recent publications, presentations and research.** Fill out the forms below and attach. The case log form is included in this area. **These forms MUST be used and uploaded.**

- National presentations
- Publications
- Program presentation
- Case log

**Describe the expertise of the faculty and other criteria that distinguishes the program at your organization in the sub-specialty selected.** 1500 character limit.

**Has your fellowship program been funded over the past 5 years?** – Yes/No.

**If so, by whom?** – List the companies that have funded your program. 250 character limit.

**What percentage of the cost of your fellowship program is funded by external sources?** Ensure that the four categories add up to 100%.

The screenshot shows a web browser window with the URL: [http://98.129.224.219/Request/ReqGeneralInformation\\_newform.aspx?C015179B9DE6037AD30985B6D4ED8DE889DC36352934ACE468D7388C94A1282D1BED164C8F5FDAEDD3AFCE](http://98.129.224.219/Request/ReqGeneralInformation_newform.aspx?C015179B9DE6037AD30985B6D4ED8DE889DC36352934ACE468D7388C94A1282D1BED164C8F5FDAEDD3AFCE)

**Externally funded questions:**

- Has your fellowship program been externally funded over the past 5 years?  Yes  No
- If so, by whom?  (Characters remaining: 0/250)
- What percentage of the cost of your fellowship program is funded by external sources?
  - Industry  %
  - State  %
  - Federal  %
  - Institution  %

**Payee Information**

Checks payable to:  Note: Must match submitted W-9 form. Cannot be an individual; payment can only be made to an institution.

Payment address: line 1:

Payment address: line 2:

Payment address: line 3:

Payment address: city:

Payment address: state:

Payment address: zip code:

Buttons:

Copyright © 2010 OMeGA Medical Grants Association. All rights reserved. Use and access of this site is subject to the terms and conditions as set out in our [Privacy Policy and Terms of Use](#).

### Payee information

- **Checks payable to** – organization name (OMeGA asks that you give 40 character limit shortened version of the organization name).
- **Address** – where the check should be sent. Include the name of the person to whom it should be directed.

### Program budget

#### Covered expenses

- Salary and benefits
- Meeting registration
- Licensing
- Books
- Research

#### Non-covered expenses

- Malpractice insurance
- Hotel for meetings
- Meals for meetings
- Travel for meetings
- Overhead

## How to enter information in the form

This amount needs to match what you put in the budget/milestone area of the application. See below for the screen shots showing how to fill out this portion of the application. Make sure you click "Save."

The next screen shot shows the breakdown of your budget request. Follow this example to insert your information. Total costs need to match the amount from the previous page in the budget and milestone section.

The screenshot shows a web browser window displaying the OMeGA Medical Grants Association Grant Request Budget form. The browser's address bar shows the URL: <http://98.129.224.219/Request/ReqRequestedBudget.aspx?C015179B9DE6037AD30985B6D4ED8D6889DC36352934ACE46BD7388C94A1282D18ED164C8F5FDAEDD3AFC64782657A85>. The browser's title bar reads "OMeGA Grant Request Budget - Windows Internet Explorer".

The OMeGA logo is visible in the top left corner. The navigation menu includes "OMeGA Homepage", "FAQs", "Help", "Contact", "Profile", and "Log out". The breadcrumb trail shows "My Grants | Requested Program Budget".

The main content area is titled "OMeGA Medical Grants Association Grant Request Budget". A progress bar indicates the current step is "Budget", with other steps being "Instructions", "General Information", "Supporting Documents", and "Submit".

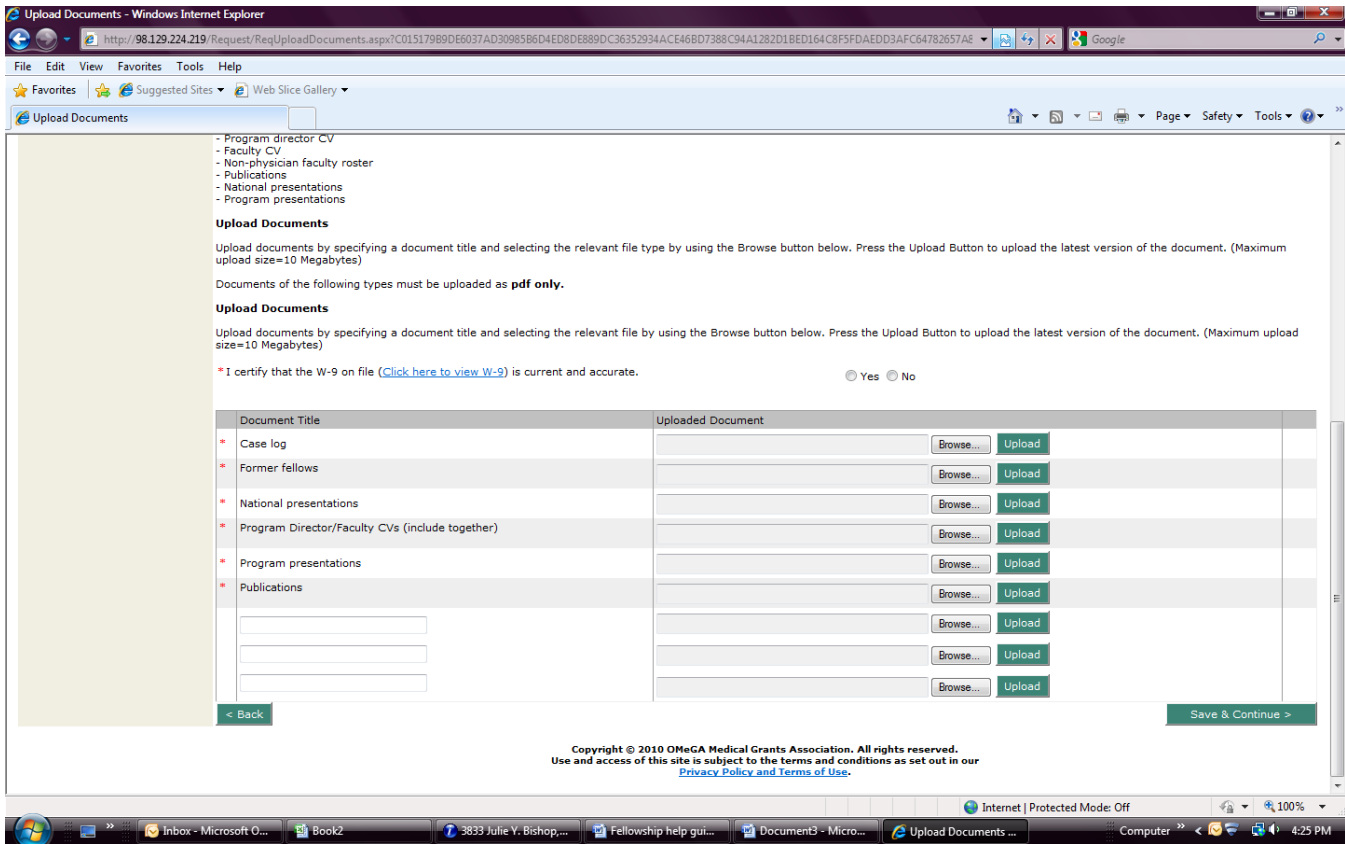
The form includes a "Fellowship Stipend" field with a value of "\$ 50000.00". Below this is a table with the following columns: "Units", "Unit Cost", "Total Cost", "Requested Amount from OMeGA", and "Comments".

	Units	Unit Cost	Total Cost	Requested Amount from OMeGA	Comments
Educational materials	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Administration and management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Other (please explain)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total :</b>			<b>\$0.00</b>	<b>\$0.00</b>	

At the bottom of the form, there are three buttons: "< Save & Back", "Save & Continue Later", and "Save & Continue >".

The Windows taskbar at the bottom shows several open applications, including "Inbox - Micro...", "2009 USSS Co...", "Templates fo...", "Fellowship he...", "Residency hel...", "Document2 -...", "Microsoft Excel", and "OMeGA Gran...". The system clock shows "2:00 PM".

# Supporting documents



This page will allow you to upload your supporting documents electronically.

## *Certifying W-9/W8BEN/501(c) 3 or any other tax forms*

Click on the links to make sure that the tax form you have submitted earlier in registration is correct. If so, click Yes. If it is incorrect, click No and you will be asked to resubmit the forms.

## **Uploads**

Documents **must** be uploaded in **PDF** format.

Program director and faculty CVs

Former fellow roster

Publications

National Presentations

Program presentation

Case log

## **After you have submitted your application**

Your application will be reviewed for completion by OMeGA. We will request additional information via e-mail from you if your request is incomplete. Programs have 10 business days to provide the necessary information before the

application request is closed. When the application deadline gets closer or if OMeGA contacts you after the deadline date, you will have 3 business days to return your information. (This will be noted in the email that is sent.)

Once all information has been received, the application will be sent to the Review Committee for that sub-specialty to review. They will recommend or deny the application and send this information to the Grants Board for final decision.

## **Grants – after the decision**

All OMeGA grant recipients must sign the Grant Recipient Agreement issued by OMeGA Medical Grants Association. There will be no changes to the Grant Recipient Agreement: please ensure that you and your grants office can agree to this document before submitting. If you have any questions on the agreement terms, please contact OMeGA at [info@omegamedicalgrants.org](mailto:info@omegamedicalgrants.org). A copy of the Grant Recipient Agreement can be found by clicking on the link “Fellowship Grant Recipient agreement for 2011-2013 academic years.”

### **Governing law issue**

*Governing Law. This Grant Agreement shall be governed by the law of the State of Illinois without regard to conflict of law rules and venue for resolution of dispute will reside with the state and federal courts located in Cook County, Illinois.*

A few programs have asked OMeGA to alter our policy on governing law, either changing to the laws of another state or country or remaining silent. While OMeGA does not anticipate any issues, this section ensures that OMeGA would consistently use one law for all problems regardless of the institution location with which the problem arose--nor need to travel to any location throughout the Americas to which OMeGA provides grants.

Please review the Grant Recipient Agreement to ensure that your program can sign it as written before applying for a grant. If an OMeGA grant is offered and the Grant Recipient Agreement as written cannot be accepted, your program must decline the grant. OMeGA will offer the grant to another deserving program that can accept the terms of the Grant Recipient Agreement.

At the conclusion of the funded activity, recipients must submit information detailing use of funds and other information to verify the grant award was used as intended. You will receive an e-mail notification on the end date of your activity. If you do not submit reconciliation within 90 calendar days of the activity end date, you may not submit additional grant requests until reconciliation is completed.

Fellowship milestone reports must be sent to the OMeGA Medical Grants Association on October 15, January 15, April 15 and July 31 throughout the term of the grant.