

# Student Award Program



## Blue Cross Blue Shield of Michigan Foundation

The philanthropic affiliate of Blue Cross Blue Shield of Michigan  
Dedicated to Improving the Health of Michigan Residents



Blue Cross Blue Shield of Michigan and the BCBSM Foundation are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.



[www.bcbsm.com/foundation](http://www.bcbsm.com/foundation)

## **Vision**

**To make a significant contribution to health care knowledge and its application to improve health by:**

- **Supporting research, and effective demonstration and evaluation projects; and**
- **Developing innovative and socially responsive health initiatives.**

## **Mission**

**The Blue Cross Blue Shield of Michigan Foundation is dedicated to improving the health of Michigan residents through the support of research and innovative programs.**

## **Core Values**

- **Commitment to Quality Performance**
- **Honesty, Integrity, Collaboration and Team Work**
- **Effective and Efficient Use of Resources**
- **Excellence in Programs, Grants and Communications**



**600 Lafayette East – X520  
Detroit, Michigan 48226**

Dear Colleague:

The Blue Cross Blue Shield of Michigan (BCBSM) Foundation would like to announce its annual Student Award Program. The BCBSM Foundation is committed to improve the health of Michigan residents through the support of research and effective demonstration and evaluation projects. The intent of our Student Award Program is to support the next generation of applied researchers in health, health services and policy.

The Student Award Program offers a one year \$3,000 stipend to fund a wide range of health care projects, including applied research, pilot programs, or demonstration and evaluation projects. All doctoral and medical students enrolled in Michigan universities are eligible. Basic research, drug studies and research involving non-human subjects are not eligible. Applications must be postmarked by April 30 of each year.

If you have any questions or would like additional information, please contact the BCBSM Foundation at (313) 225-8706.

Sincerely,

Ira Strumwasser, PhD  
Executive Director & CEO

# Student Award Program

## Call for Entries

The Blue Cross Blue Shield of Michigan Foundation (BCBSM Foundation) invites medical and doctoral students at Michigan universities to submit proposals for the Student Award Program.

### About the BCBSM Foundation and its Student Award Program

The BCBSM Foundation is the philanthropic affiliate of Blue Cross and Blue Shield of Michigan. The Foundation's mission is to improve the health of Michigan residents through the support of research or demonstration and evaluation projects that affect:

- Quality and costs of care
- Access to care
- Community health

The BCBSM Foundation funds students for a wide range of applied research projects (including pilot projects, demonstration and evaluation projects and feasibility studies) that support the above objectives. The Student Award Program provides a one-year stipend of \$3,000 to students for applied

research addressing health, health services or policy. Our intent is to support the next generation of applied researchers in health and health care policy and delivery, by supporting doctoral (PhD or Dr. PH) and medical (MD or DO) student research.

### Eligibility

All medical and doctoral-level students enrolled in Michigan universities during the academic year are eligible. Completed or substantially completed dissertations or research projects are not eligible. Students who previously received this award are not eligible. Blue Cross and Blue Shield of Michigan employees, members of their immediate families, and employees and immediate family members of any Blue Cross and Blue Shield of Michigan affiliate and subsidiaries are not eligible. Investigation of pharmaceutical efficacy, basic research or research involving non-human subjects is not eligible. Grant monies are not intended to support field placements, practica or internships.

For consideration, the proposed project must focus geographically on the state of Michigan and address the BCBSM Foundation's objectives.

# Student Award Program

## Application Information

The following information should be forwarded to: Program Officer, Student Award Program, BCBSM Foundation, 600 Lafayette East – X520, Detroit, Michigan 48226.

1. The application form that is attached to this brochure.
2. Two copies of a three-page proposal that includes descriptions of:
  - The health care issue addressed by this project;
  - A literature review, including a comparison of this project to previous and similar studies;
  - The purpose of the project;
  - The study design and methods;
  - The expected contribution toward improving health care in Michigan;
  - The expected form of the final report. If the project is your dissertation work, your dissertation is your final report.
3. If you intend to use human subjects or sensitive data, enclose a copy of Human Subjects Review Committee approval. If you have not yet received approval, note when you expect it, and forward

a copy to the Foundation, immediately after committee approval has been received.

4. A letter of endorsement from a faculty member of your department. This letter should include an evaluation of the proposed project, an assessment of your ability to complete the project, and a statement that the faculty member is willing to supervise your work. This letter **must** include a statement from the faculty member that your student status is expected to continue through the academic year and the expected completion date for your project/doctoral dissertation. If your status changes, the nominating faculty member and the student are expected to contact the Foundation.
5. Official transcripts, reflecting doctoral status, must be mailed by the university registrar directly to the BCBSM Foundation. Student copies or photocopies will not be accepted.
6. Resume.
7. A one paragraph biographical sketch.
8. A self-addressed, stamped postcard, for proposal receipt confirmation.

Application deadline (by postmark) is **April 30** of each year. No fax, hand or email deliveries will be accepted. Award announcements will be made in August of each year.

**For more information, call (313) 225-8706**

# **BCBSM Foundation Student Award Program Grant Application Form**

(Please type)

Name: \_\_\_\_\_

University: \_\_\_\_\_

Expected graduation date: \_\_\_\_\_

Address:

School, department and program: \_\_\_\_\_

\_\_\_\_\_

Office phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Project title: \_\_\_\_\_

\_\_\_\_\_

Project summary (one paragraph):

Expected completion date of research/doctoral dissertation: \_\_\_\_\_

Faculty advisor (name, address, phone):

Department head (name, address, phone):

**Enclosure checklist:**

- Two copies of full proposal (three pages in length)
- Resume
- One paragraph biographical sketch
- Letter of endorsement
- Copy of Human Subjects Review Committee approval or date when expected
- Self-addressed, stamped postcard
- Official transcripts to be sent directly to BCBSM Foundation

Please send the form and other materials to:

Student Award Program  
Blue Cross Blue Shield  
of Michigan Foundation  
600 Lafayette East – X520  
Detroit, Michigan 48226