



## Brady Cox Endowment Information and Instructions

**Purpose of Brady Cox endowment funds:** *Endowment funds should be used to fund activities that enrich the education of Pre-Health Professional students, with the goal of broadening experience and preparation for a successful future as a health care professional. The maximum award is \$250.*

### What is covered by endowment funds?

Registration fees (Conferences, symposiums, etc.)	Auto (Car rental, parking)
Lodging expenses (hotel, Airbnb)	Meals (breakfast, lunch, snacks, dinner)
Car expenses (mileage, Uber, Lyft, taxi)	Travel (airfare, luggage)

**Who is eligible?** Students who are working with a faculty member complete the Pre- Athletic Training, Physical Therapy, Occupational Therapy, Dental, Pharmacy, Medical, or Veterinary track according to the McMurry Catalog. Students who have an interest in pursuing a health-related profession are also eligible to receive endowment funds regardless of their major.

**How will funds be disbursed?** Depending on the type of expense:

- A. The supervising faculty member may use their credit card to cover expenses up to the total amount awarded.
- B. If the student incurs the cost and exceeds the amount awarded, the supervising faculty member may request a reimbursement check for the student in the total amount awarded.
- C. If the student incurs the costs and spends less than the amount awarded, they may be reimbursed up to the amount spent.

### Application Process

**Step 1:** Read the Brady Cox Endowment Information and Instruction sheet to determine eligibility.

**Step 2:** Download the Application form, fill it out with as much detail as possible and return it to the supervising faculty member for their approval. Once signed by the supervising faculty member, the Department/Division Chair will sign it, and then you will take the signed form to the STEM Career Specialist for further instruction.

**Step 3:** The supervising faculty member will notify student of approval and determine the best way to distribute funds and incur expenses.

**Step 4:** Once the activity or trip is completed, the student is responsible for completing:

- A. Thank You card for the Brady Cox family. Cards can be picked up and dropped off in the STEM Student Success Center (Library- First floor).
- B. A brief reflection (typed) answering the following prompt: *Please explain what you learned by participating in the event you recently attended. How did the Brady Cox Endowment funds play a part in making your experience enjoyable?*

Both the Thank You card and reflection page are to be turned in to the STEM Student Success Center located on the first floor of the Jay-Rollins Library within a week of project completion. You may email the reflection page to [mcmurrys3c@mcm.edu](mailto:mcmurrys3c@mcm.edu).

### Faculty Only – Reconciling Expenses

- A. If a student is participating in a university sponsored trip with an accompanied faculty member, the faculty member will create and complete an expense report. Turn in the completed expense report to the STEM Student Success Center (S3C). The S3C will deliver the expense report to VPAA for processing.
- B. If the student is unaccompanied, all receipts will go to the STEM Career Specialist. The STEM Career Specialist will create the expense report and have the student and supervising faculty member sign before turning into the VPAA office.



# Application for Brady Cox Endowment Funds

## Part I. Student Information *(To be completed by student)*

Student Name: \_\_\_\_\_ Student Phone Number: \_\_\_\_\_  
 Student ID Number: \_\_\_\_\_ McMurry E-mail: \_\_\_\_\_  
 Academic Department or Unit: \_\_\_\_\_

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Please be as descriptive as possible in the spaces provided below.

1. Dates for the activity: Start: \_\_\_\_\_ End: \_\_\_\_\_
2. Location of activity: \_\_\_\_\_
3. Describe the activity: \_\_\_\_\_

## ANTICIPATED FUNDING NEEDS

Registration Fee	\$ _____	Auto	\$ _____
Lodging	\$ _____	Meals	\$ _____
Car Expense	\$ _____	Airfare	\$ _____

List other anticipated expenses: \_\_\_\_\_

TOTAL amount of funds requested \$ \_\_\_\_\_

**Disclaimer:** *If funds are awarded to you, please be prepared to write a thank you card to the Brady Cox family. You can stop by the STEM Student Success Center in Old Main South for a blank card to submit.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## Part II. Faculty Input *(Please print – this part should be completed and signed each party below. Start with your Supervising Faculty Member and end with the STEM Career Specialist.)*

Budget Year for activity requested: June 1<sup>st</sup> to May 31<sup>st</sup>

Supervising Faculty Signature: \_\_\_\_\_ (Date)

Division/Department Chair Signature: \_\_\_\_\_ (Date)

STEM Career Specialist Signature: \_\_\_\_\_ (Date)

VP of Academic Affairs Signature: \_\_\_\_\_ (Date)