

Ralph N. Rogers, MD Leadership Fund

Eligibility Criteria

To be eligible *as* an awardee, the individual must meet the following specific criteria:

Eligibility Criteria for Selection:

A. Medical Transport Service Expertise:

1. One year of leadership in medical transport experience.
2. Employment with a medical transport service or ground critical care service, current accreditation by CAMTS is *preferred*.
3. Recent experience and currently involved in medical transport service activities.
4. Preferred experience in two (2) of the four (4) following areas of expertise:
 - a. Administration
 - b. Aviation
 - c. Medical
 - d. Ground critical care transport

B. Effective Communications and Interpersonal Skills:

Professionalism/confidentiality/initiative/objectivity/ethics.

C. Completion Timeline:

Ability to complete the selected leadership education course within two years.

D. Geographic Location and Background Experience:

The CAMTS Leadership Fund Selection Committee may select an awardee located within the United States or internationally.

The criteria will demonstrate an Awardee who is highly qualified and demonstrates the characteristics of a strong leader in the medical transport service.

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Application Process

Applications accepted July 15 – September 11, 2020

Application Process

The applicant must:

1. Complete the application form.
2. Submit a letter of interest. Refer to guidelines on page 4.
3. Submit a current resume or curriculum vitae. If not currently employed by a medical transport service, the applicant must provide information on current involvement in the medical transport services.
4. Two (2) Professional Recommendation Requests must be submitted to the CAMTS office. The applicant is responsible for getting the reference requests to the appropriate people.

Type your name on the form in the proper spaces so each person will know whose request he/she is fulfilling. *Remember to sign the waiver on each form.* These references will be confidential. The letters will be mailed directly to:

CAMTS
P.O. Box 130
Sandy Springs, SC
29677

Refer to page 5 and 6 for reference letters.

5. Return your completed application, letter of interest, and resume or curriculum vitae to:

CAMTS
P.O. Box 130
Sandy Springs, SC 29677
or admin@camts.org

NOTE: Incomplete applications will not be accepted. No exceptions will be made. Please encourage the people submitting a recommendation for you to submit within the deadline. Carefully review the application and all supporting documentation to assure that eligibility criteria are met and are documented correctly and completely. You will receive a confirmation email shortly after your submission.



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LETTER OF INTEREST **GUIDELINES**

Provide a letter of interest to the CAMTS Leadership Fund Selection Committee stating in 250 words or less (double-spaced and typed):

- I. Why you want to be the Ralph N. Rogers, MD Leadership Fund Awardee?

- II. What do you have to offer to the medical transport profession by becoming the awardee.

- III. Why you should be chosen as the awardee of the Ralph N. Rogers, MD Leadership Fund?

- IV. Specifically how will the funds be used? What professional leadership course/education or Master's Degree Program are you currently pursuing or plan to pursue? Are you currently accepted into the course/program?

- V. Specifically how much funding are you requesting for this purpose?



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PROFESSIONAL RECOMMENDATION REQUEST

_____ has requested that you provide a reference for him/her for the awardee of the Ralph N. Rogers, MD Leadership Fund sponsored by the Commission on Accreditation of Medical Transport Systems (CAMTS).

This is a scholarship that offers the awardee funds towards the completion of a professional leadership course (MTLI) or a Master’s level degree to promote leadership in the medical transport of patient care and safety of the transport environment.

The CAMTS Leadership Fund Selection Committee would appreciate your cooperation in determining his/her potential for success in completing a Master’s level degree or leadership course (MTLI) (or as approved by the selection committee). The application will be considered incomplete until you have returned this form. All appraisals are held in confidence. This form has been read and approved by the applicant whose signature appears below.

The evaluation form on the next page is intended to help you present information about the applicant. Any additional comments you wish to make about this applicant are most welcome. We appreciate your assistance and would like to assure you that your comments will be carefully considered.

Thank you,

Ralph N. Rogers, MD Leadership Fund Selection Committee

I have read and approved this request for information. I understand that I may voluntarily waive my right to have access to this reference letter. I hereby waive, relinquish and disclaim all rights to have access to the Recommendation Request described in this form.

_____/_____
Signature of Applicant Date

The deadline for this form is ____/____/____.



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Evaluation For: _____ (print name of award applicant)

Please check what describes this applicant to the best of your knowledge.

	<u>Excellent</u>	<u>Very Good</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>
Dependability					
Accountability					
Initiative					
Knowledge Base					
Leadership Skills					
Professionalism					
Moral Integrity					
Objectivity					
Enthusiasm					
Quality of Work					
Confidentiality					

Comments: (Attach additional sheets as needed)

How long have you known this applicant? _____

In what capacity? _____

Recommender's Name (Type or Print)- _____
 _____ Position/Title _____

Company/Institution _____ Business Phone _____

 Signature Date

Please send this reference form directly to: CAMTS
 P.O. Box 130
 Sandy Springs, SC 29677