



**AAFPRS Foundation Awards
Official Entry Form**

(please check one)

Ben Shuster Memorial **Ira Tresley Research** **Residency Travel**

This form must be completed and submitted with your paper to the AAFPRS Foundation office before the deadline of **February 1**. Your paper must conform to the guidelines of the *Archives of Facial Plastic Surgery*. You may e-mail this form and attach your paper (PDF or Word file) to: mbusey@aafprs.org or mail to: AAFPRS, 310 S. Henry Street, Alexandria, VA 22314; fax (703) 299-8898.

Title of Proposal: _____

Author of Proposal: _____

Department: _____

Institution: _____

Mailing Address: _____

Phone: _____ E-mail: _____

- My entry conforms to the guidelines of the *Archives of Facial Plastic Surgery* and does not exceed 20 pages.
- I have enclosed/attached the original and one quality copy of my paper.
- My entry was presented at a national meeting on _____ (date)
Name of Meeting _____
- I am an AAFPRS member and eligible for the Ben Shuster award based on the requirement as stated.
- I am an AAFPRS member and eligible for the Ira Tresley award based on the requirements as stated.
Date of Board Certification _____ *What Board?* _____
- I am a resident or medical student in training and eligible for the Residency Travel award based on the requirements as stated.

Applicant's Signature: _____ Date: _____