

NEACSM Student Access Award Application

Submit completed applications to neacsm1@gmail.com by Friday, October 10, 2025 at 5pm ET.

NEACSM Student Access Awards are designed to address student financial need and support long term engagement of students from marginalized backgrounds (e.g., race, ethnicity, class, gender, age, sexuality, ability, creed, culture, tribal affiliation, nationality, military veteran and immigration status). Undergraduate and graduate students experiencing financial hardship that prevents them from participating in NEACSM programming are encouraged to apply. Each winner will receive one year of NEACSM membership and one year of conference registrations at no cost, as well as \$300.00 available for reimbursement of related conference costs (e.g. transportation, lodging, technology). Additionally, winners will be paired with a mentor and leader from the NEACSM community who will assist will connect with them at both conferences and provide professional development, networking, and fostering a connection to NEACSM. Awardees will also have opportunities to meet current NEACSM leaders and participate in an NEACSM Executive Committee meeting.

Awards will be granted to qualified individuals on a first come, first served basis. Individuals *do not* need to be NEACSM members to apply.

Award Overview:

- 1-year NEACSM student membership
- Free registration to the NEACSM Spring Conference
- Free registration to the NEACSM Fall Conference
- Matched with a mentor who will assist the awardee through networking, professional development and facilitate involvement with NEACSM
- Meetings with ELT members and invitation to an NEACSM EC Meeting

Applicants must submit the following items:

- A completed application, including student essay. See form below.
- Faculty attestation of student's demonstrated financial need, submitted directly by faculty member via email to neacsm1@gmail.com.
- Documentation of current enrollment in an undergraduate or graduate program related to sports medicine/health sciences.

If selected for a Student Access Awards must agree to:

- Submit three brief experience reports describing the mentorship experience. These are nonevaluative touchpoints between NEACSM and awardees, to ensure a good experience.
- Demonstrate a good faith effort to engage with mentor and attend conferences.
- Notify NEACSM Awards Committee Chair and NEACSM Office if mentor is nonresponsive or if the mentor/mentee pairing is not a good match.
- Attend the 2025 NEACSM Fall Conference and the 2026 NEACSM Spring Meeting and meet with mentee during these events.
- Attend one NEACSM Executive Committee Meeting during the award period.
- Submit an abstract to present at the 2026 Spring Meeting

Incomplete or late applications will not be considered (this includes the faculty attestation). Applications may also be obtained at the NEACSM website: www.neacsm.org/awards. **Submit completed applications to neacsm1@gmail.com by Friday, October 10 at 5pm ET.**

Applicant Information

Applicant's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Email: _____

College/University: _____

Academic Year: _____ GPA: _____

Area of Study: _____

Faculty Advisor: _____

Essay

Write an essay where you address your qualifications for the Student Access Award. Are you experiencing financial hardship? Have you encountered difficulties accessing professional development programming, including NEACSM programming, due to financial hardship? Describe how this Award will help you better engage with the NEACSM community. Responses should be 300-500 words in length. Type responses here or attach as separate page.

Faculty Attestation

I have read this student's application for the NEACSM Student Access Award and can attest to this individual's candidacy for this Award. To the best of my knowledge, this individual is a current undergraduate or graduate student in a sports medicine/health science-related major and has demonstrated financial hardship or relevant barrier that prevents their full engagement with the NEACSM community and qualifies them for this Award.

Student Name: _____

Faculty Name and Title: _____

Faculty College/University Affiliation: _____

Faculty Signature: _____

Date: _____

Faculty should email this form, signed and completed, to neacsm1@gmail.com. Faculty attestation forms submitted by students will not be accepted.