

CASHE Education Program Application

Date _____

CASHE provides education funds for our healthcare members or for the staff of healthcare members. Any current Healthcare Member can request for funds from the Education Program.
(Healthcare Members are defined as current paid Healthcare members of the CASHE organization)

An application will be completed by the Healthcare Member and submitted to the CASHE Board.

The CASHE Board will review the application at the monthly board meeting.

All initial fees are the responsibility of the applicant or their facility.

Payment will be made once verification has been given to the board that the course was completed with a passing grade.

Any non-CASHE member successfully completing the training program may join CASHE without paying the normal member application fee.

Applications for education funds will not be accepted for the CASHE annual Seminar.

If you have any questions about eligibility please contact any CASHE Board member .Their contact information is located on the CASHE website at cashe-md.org

Application information

CASHE Members Name _____

Attendee's name _____

Facility Information _____

Attendee's job title _____

How is the program beneficial to the attendee?

Provide course name and attach course application:

