## AFP Practice Plan FMC and/or Department Chair Confirmation of Support for AMOSO Opportunities Funding

This form is to be completed by the FMC Chair and/or Department Chair of those AFP Practice Plans or Departments who can benefit from the project (Criteria #2) or who participate without sharing fiscal responsibility (Criteria #9)

Criteria #2 - of the AMOSO Opportunities Fund Guidelines and Application Process: "All proposals must illustrate how the project contributes to the academic deliverables of more than one AFP Practice Plan or Schulich School of Medicine & Dentistry Department (including Basic Sciences)"

Criteria #9 - of the AMOSO Opportunities Fund Guidelines and Application Process: "AFP Practice Plans or Schulich School of Medicine & Dentistry departments participating in the project but not sharing in the fiscal responsibility must provide confirmation of support from either the AFP Practice Plan FMC Chair or Department Chair"

High-quality low-cost open-access medical hardware for London, Ontario and beyond

Project Title:

AFP Physician Project Lead:

Tarek Loubani
The intent of providing confirmation of support for projects submitted for Opportunities funding is to ensure that the AFP Practice Plan FMC Chair and/or the Department Chair and appropriate leadership have considered the feasibility of the project and that the project clearly outlines how it contributes to the academic deliverables of their Practice Plan or Department. As such, please confirm as applicable, one or both of the following:
To be Completed by the AFP Practice Plan FMC Chair and/or Department Chair:
Confirmation of support per Criteria #2: The AFP Practice Plan FMC Chair and/or the Department Chair have reviewed the project content and agree that the project contributes to the academic deliverables of their AFP Practice Plan and/or Department.
Comments: Very supporture et this cutting edge. project.
Confirmation of support per Criteria #9: The AFP Practice Plan FMC Chair and/or the Department Chair agree that the project content demonstrates alignment with the strategic direction of the AFP Practice Plan and/or Department and therefore supports the Practice Plan and/or Department's participation in the project.
Comments:
The Department of AFP FMC Committee Chair or Department Chair confirms support of the above submission(s) for AMOSO Opportunities Funding.
AFP FMC Chair or Dept. Chair: John Gilson Date: Sept 15 7016.
Signature:
Confirmation of Support by Division Chair (Optional):

FORM: FMC-111

## AFP Financial Management Committee Approval for AMOSO Opportunities Funding

This form is to be completed to ensure compliance with the following criteria:

Project Title:

AFP Physician Project Lead:

Criteria #7 - of the AMOSO Opportunities Fund Guidelines and Application Process: "Approval from the FMC for the Lead Project Sponsor AFP Practice Plan must occur <u>before</u> submission to the Opportunities Fund Sub-Committee"

Criteria #8 - of the AMOSO Opportunities Fund Guidelines and Application Process: "If other AFP Practice Plans share fiscal responsibility for the project, approval from the FMC for the respective AFP Practice Plans must occur <u>before</u> submission to the Opportunities Fund Sub-Committee"

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Tarek Loubani
The intent of the AFP FMC approval form is to ensure that the AFP Practice Plan FMC and appropriate leadership, support and have considered the feasibility of the project they are endorsing prior to the AMOSO Opportunities Fund Sub-Committee review process. As such, please confirm the following:
To be Completed by the AFP FMC Chair:
The AFP Practice Plan FMC agrees that the project content demonstrates alignment with the strategic direction of the AFP Practice Plan.
Comments:
The AFP Practice Plan FMC has reviewed the budget request including cost/time estimates; other sources of funding both applied for and received; and impact on current resources.
comments: Supportive. of this worthwhile project.
The AFP FMC Committee for the AFP Practice Plan of above submission(s) for AMOSO Innovation Reporting.
AFP FMC Chair: John GIBSON Date: Sup 15 2016
Signature:
*Please email or fax completed FORM – FMC 111 to amoso@lhsc.on.ca or fax 519-685-8336