

**A. Application Type:**

From SF424 (R&R) Cover Page. The response provided on that page, regarding the type of application being submitted, is repeated here for your reference, as you provide the responses that are appropriate for this Fellowship application.

- New
  Resubmission
  Renewal
  Continuation
  Revision

**B. Research Training Plan**

- |   |                      |                |                   |                 |
|---|----------------------|----------------|-------------------|-----------------|
| 1. Introduction to Application<br><i>(for RESUBMISSION applications only)</i> | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 2. * Specific Aims  | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 3. * Research Strategy  | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 4. Inclusion Enrollment Report<br><i>(for RENEWAL applications only)</i>      | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 5. Progress Report Publication List<br><i>(for RENEWAL applications only)</i> | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |

Human Subjects

*Please note. The following item is taken from the Research & Related Other Project Information form. The response provided on that page, regarding the involvement of human subjects, is repeated here for your reference as you provide related responses for this Fellowship application. If you wish to change the answer to the item shown below, please do so on the Research & Related Other Project Information form; you will not be able to edit the response here.*

Are Human Subjects Involved?  Yes  No

6. Human Subjects Involvement Indefinite?  Yes  No
7. Clinical Trial?  Yes  No
8. \* Agency-Defined Phase III Clinical Trial?  Yes  No

- |                                       |                      |                |                   |                 |
|---------------------------------------|----------------------|----------------|-------------------|-----------------|
| 9. Protection of Human Subjects       | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 10. Inclusion of Women and Minorities | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 11. Targeted/Planned Enrollment       | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 12. Inclusion of Children             | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |

Other Research Training Plan Sections

*Please note. The following item is taken from the Research & Related Other Project Information form. The response provided on that page, regarding the use of vertebrate animals, is repeated here for your reference as you provide related responses for this Fellowship application. If you wish to change the answer to the item shown below, please do so on the Research & Related Other Project Information form; you will not be able to edit the response here.*

Are Vertebrate Animals Used?  Yes  No

13. Vertebrate Animals Use Indefinite?  Yes  No

- |  |                      |                |                   |                 |
|--|----------------------|----------------|-------------------|-----------------|
| 14. Vertebrate Animals                     | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 15. Select Agent Research                  | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 16. Resource Sharing Plan                  | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 17. * Respective Contributions             | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 18. * Selection of Sponsor and Institution | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |
| 19. * Responsible Conduct of Research      | <input type="text"/> | Add Attachment | Delete Attachment | View Attachment |

C. Additional Information

Human Embryonic Stem Cells

1. \* Does the proposed project involve human embryonic stem cells?  Yes  No

If the proposed project involves human embryonic stem cells, list below the registration number of the specific cell line(s), using the registry information provided within the agency instructions. Or, if a specific stem cell line cannot be referenced at this time, please check the box indicating that one from the Registry will be used:

Specific stem cell line cannot be referenced at this time. One from the registry will be used.

Cell Line(s):

Four columns of empty text boxes for entering cell line information.

Fellowship Applicant

2. Alternate Phone Number:

3. Degree Sought During Proposed Award:

Degree:

If "other", please indicate degree type:

Expected Completion Date (month/year):

Reset Entry

4. \* Field of Training for Current Proposal:

5. \* Current And/Or Prior Kirschstein-NRSA Support?  Yes  No

If yes, please identify current and/or prior Kirschstein-NRSA support below:

Table with 5 columns: \* Level, \* Type, Start Date (if known), End Date (if known), Grant Number (if known). Includes a 'Reset Entry' button for each row.

6. \* Applications for Concurrent Support?  Yes  No

If yes, please describe in an attached file:

Add Attachment Delete Attachment View Attachment

7. \* Goals for Fellowship Training and Career

Add Attachment Delete Attachment View Attachment

8. \* Activities Planned Under This Award

Add Attachment Delete Attachment View Attachment

9. \* Research Experience

Add Attachment Delete Attachment View Attachment

10. \* Citizenship:  U.S. Citizen or noncitizen national  Permanent Resident of U.S. Pending  Permanent Resident of U.S. (if a permanent resident of the U.S., a notarized statement must be provided by the time of award)  Non-U.S. Citizen with temporary U.S. visa

C. Additional Information (continued)

Institution

11.  Change of sponsoring Institution

Name of Former Institution:

D. Budget

All Fellowship Applicants:

1. \* Tuition and Fees:

None requested

Funds Requested:

Year 1

Year 2

Year 3

Year 4

Year 5

Year 6 (when applicable)

Total Funds Requested:

Senior Fellowship Applicants Only:

2. Present Institutional Base Salary:

Amount

Academic Period

Number of Months

Reset Entry

3. Stipends/Salary During First Year of Proposed Fellowship:

a. Federal Stipend Requested:

Amount

Number of Months

b. Supplementation from other sources:

Amount

Number of Months

Type (sabbatical leave, salary, etc.)

Source

E. Appendix

Add Attachments

Remove Attachments

View Attachments