home for prospective applicants

TECHNICAL IRTA FELLOWSHIP PROGRAM

PROGRAM APPLICATION

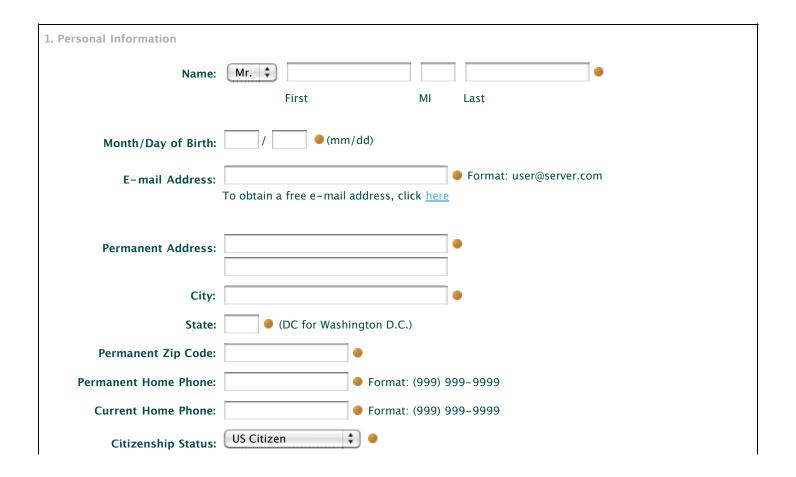
OMB No. 0925-0299 Expiration Date 9/30/2012 Respondent Burden

<u>Instructions</u>: Before you begin, you may want to review some <u>helpful hints</u> on using electronic forms and a statement about <u>privacy</u>. After you fill out the application form below, press the [Preview] button at the bottom of the page and review your application for accuracy.

Eligibility Criteria:

- 1. Candidates must have graduated from a fully accredited U.S. College or University with a Bachelors or Masters degree.
- 2. Candidates must be U.S. citizens or permanent residents.

Indicates a required field!



	If Permanent Resident:
	Country of Citizenship Alien Registration No.
2. Academic Information	
Current School (or last school attended):	
Cumulative GPA:	
School Grading Scale:	•
	Note: If you select 'Other', please explain in Section 3, Coursework and Grades. Be sure to describe your school's grading scale and your current cumulative average relative to that scale.
Academic Major:	Select • or
Degree Type:	•
Month and Year Degree Received/Expected:	/ (mm/yyyy)
3. Coursework and Grades Course Title	Grade
4.61//2	<i>A</i> ●
	rriculum vitae into this space. Minor reformatting may be necessary. Include education, relevant ublications, honors and awards, etc.
5. References Letters of recommendation will b	e expected from

Reference 1 (Name, Address, Pho	one, Email):				
Name:	Mr. ‡				•
		First	MI	Last	
Address:					•
Phone:					•
E-mail:					Format: user@server.com
Once your application is complete recommendation.	, an e-mail v	will be automatically sen	t to this 1	referen	ce requesting an online letter of
Reference 2 (Name, Address, Pho	one, Email):				
Name:	Mr. 🛊				•
		First	MI	Last	
Address:					•
Phone:					•
E-mail:					Format: user@server.com
Once your application is complete recommendation. 6. Research Interests 1	† (
7. Cover Letter: nclude your research interests, ca	reer goals, a	nd reasons for applying	for traini	ng at t	he NIH.

Ad in a scientific journal (Nature, Science); please specify:		
Ad in a student journal; please specify:		
Ad in a meeting program		
Exhibit at a meeting; please specify:		
Career development/opportunities workshop		
☐ Flier		
Poster		
From a mentor or advisor		
From an alumnus/alumna of the program		
□ NIH representative visited school		
☐ Web search		
Other; please specify:		

Notice to all applicants:

Students are advised to ensure that all application information is accurate. False or inaccurate information contained in this application may be grounds for denying your candidacy or removing you from the program.

Preview Complete Application

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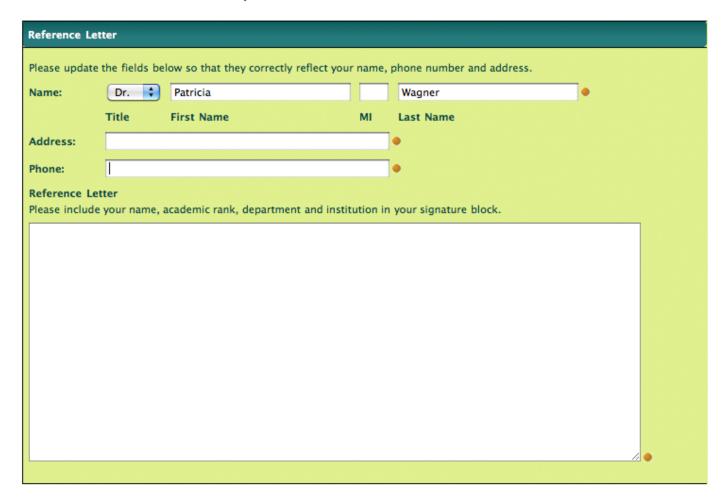
LETTER OF RECOMMENDATION FOR DR. PATRICIA WAGNER

OMB No. 0925-0299 Expiration Date 9/30/2012

Respondent Burden

Instructions:

- Copy and paste your letter of reference into the boxed area below. (Note: We recommend that you compose your letter offline and paste it into the space below. If you attempt to compose your letter while logged on to this site, you may experience a
 connection timeout or some other technical problem beyond our control, which may result in your text being irretrievably lost.)
- · Click on the button below to submit your letter.



Submit

GO







Burden Disclosure Statement for Applicants –

Public reporting burden for this collection of information is estimated to average 45-minutes for the application and 45-minutes for the supplemental material per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0299). Do not return the completed form to this address.

Burden Disclosure Statement for References -

Public reporting burden for this collection of information is estimated to average 15-minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0299). Do not return the completed form to this address.