

Application for Institutional Partnerships

You are on step:

- 1** Contact Information
- 2 Personal Information
- 3 Academic Profile
- 4 Partnership Selection
- 5 References
- 6 Optional Statistics
- 7 Review

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Application for Institutional Partnerships

Contact Information

The information requested in this section is used to establish methods for contacting you throughout the application and admission process. Please make sure all information submitted is correct, especially email and phone numbers.

Application Type:
Institutional Partnership - Prospective students wishing to enroll in a PhD partnership between NIH and host University. Enrollment is limited to US citizens and US permanent residents.

First Name: (Given Name)

Middle Name:

Last Name: (Family Name)

Email*:

Phone Number:

Address*:
Street:

City:

State:

Zip:

Country:

Password: For security purposes, the password must meet the following criteria:
1. Must be between 8 and 14 characters
2. Must contain **1 of each** of the following:
• Lower case letter • upper case letter • number • special character (i.e. !, %, ^)

Verify Password: Enter the password again

[Save & Continue](#)

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Application for Institutional Partnerships

Application Number*: 570421896

Personal Information

This information is used to determine your eligibility for a partnership. Applicants for admission into Institutional Partnerships must be United States of America citizens or United States of America permanent residents. No exceptions.

ID - GPP:

Date of Birth:

Citizenship*:

US Citizen or Permanent Resident?* Are you a US Citizen or a Permanent Resident?
 yes no

Native Language:

Additional Fluencies:

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Academic Profile

This section is broken down into two sections: Educational History and Standardized Examinations (GRE, MCAT, TOEFL).

Educational History:

Submit information about each university / college attended during undergraduate and graduate school, even if you did not obtain a degree from that institution. Enter educational information in chronological order with the most recent enrollment first. You will be able to add as many records as needed to accurately represent your educational history.

University*	<input type="text"/>
Start Date*	<input type="text"/> <input type="text"/>
End Date*	<input type="text"/> <input type="text"/>
Major Field of Study*	<input type="text"/>
Second Academic Major / Minor:	<input type="text"/>
Degree*	<input type="text"/>
GPA:	Example: GPA = 3.5 <input type="text"/>
GPA Scale:	Example: GPA Scale = 4.0 <input type="text"/>
Delete	

[+Add New School](#)

You will need to enter both the scores and percentiles for any standardized examination score completed: GRE, GRE Subject, MCAT, or TOEFL. If you are taking the examination in the coming months include the estimated date of the exam in your application so the admission committee knows results are pending.

Graduate Record Examination (GRE):

The GRE General Test is required for all Institutional Partnerships. Karolinska Institutet partnership will accept MCAT score in lieu of a GRE score.

Exam Date:	<input type="text"/> <input type="text"/>
Verbal Reasoning Score:	<input type="text"/>
Verbal Reasoning Percentile:	<input type="text"/>
Quantitative Reasoning Score:	<input type="text"/>
Quantitative Reasoning Percentile:	<input type="text"/>
Analytical Writing Score:	<input type="text"/>

Analytical Writing Percentile:	<input type="text" value="0"/>
Analytical Score (pre-October 2002):	<input type="text" value="0"/>
Analytical Score (pre-October 2002) Percentile:	<input type="text" value="0"/>
Subject Exam Date:	<input type="text"/> <input type="text"/>
Exam Subject:	<input type="text"/>
Subject Score:	<input type="text" value="0"/>
Subject Percentile:	<input type="text" value="0"/>
MCAT:	
MCAT exam is required for admission consideration in the NIH Intramural MD/PhD partnership.	
Exam Date:	<input type="text"/> <input type="text"/>
Verbal Reasoning Score:	<input type="text" value="0"/>
Verbal Percentile:	<input type="text"/>
Physical Sciences Score:	<input type="text" value="0"/>
Physical Sciences Percentile:	<input type="text"/>
Biological Sciences Score:	<input type="text" value="0"/>
Biological Sciences Percentile:	<input type="text"/>
Writing Sample Score:	<input type="text"/>
Writing Sample Percentile:	<input type="text"/>
TOEFL:	
Exam Date:	<input type="text"/> <input type="text"/>
Type of Exam Taken:	<input type="text"/>
Listening Score:	<input type="text" value="0"/>
Listening Percentile:	<input type="text" value="0"/>
Writing Score:	<input type="text" value="0"/>
Writing Percentile:	<input type="text" value="0"/>
Reading Score:	<input type="text" value="0"/>
Reading Percentile:	<input type="text" value="0"/>
Essay Rating:	<input type="text" value="0"/>
Essay Percentile:	<input type="text" value="0"/>
Total TOEFL Score:	<input type="text" value="0"/>
Total Percentile:	<input type="text" value="0"/>

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Partnership Selection

The GPP has many NIH-University Institutional Partnerships. A complete list and description of each partnership is available by navigating through the Prospective Students section of the [GPP website](#). If you have any questions or concerns about identifying which partnership(s) best match your education and career goals contact the GPP or any of the partnership directors for assistance.

You may select up to THREE (3) NIH-University partnerships for admission consideration

First Selection*:

Partnership*:

Second Selection:

Partnership:

Third Selection:

Partnership:

AAMC Number: If applicable

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References

Three letters of recommendation from three different individuals are needed to complete the GPP application. Choose references that are familiar with your educational training and especially your prior research experience. After you submit the name and e-mail address of each recommender, we will automatically send an email message to each reference requesting that a letter be submitted on your behalf. The email message contains directions about completing the evaluation form and submitting a recommendation letter electronically. Periodically contact each of your references to ensure receipt of the request. If a recommendation request needs to be resent, contact the GPP at gpp@nih.gov or the Ask A Question box. Hardcopies of recommendation letters will not be processed by the GPP.

Although not required, you are allowed to submit a fourth reference in Part-A. As the application season proceeds if you find that you must make a substitution on one or more of your references you are able to do so by completing additional fields for new references within Part-B of the application; select edit view within the Reference step.

Under the Privacy Act of 1974, you have the right to access the information contained within a recommendation unless you have waived such access. For each reference, your response about waiving access to each letter of recommendation is required. Your references will be given your response to waiving access to the letter of recommendation.

Recommendation #1	
Title:	<input type="text"/>
First Name*:	<input type="text"/>
Middle Name:	<input type="text"/>
Last Name*:	<input type="text"/>
Email*:	<input type="text"/>
Waive Access*:	<input type="radio"/> yes <input type="radio"/> no
Delete	

Recommendation #2	
Title:	<input type="text"/>
First Name*:	<input type="text"/>
Middle Name:	<input type="text"/>
Last Name*:	<input type="text"/>
Email*:	<input type="text"/>
Waive Access*:	<input type="radio"/> yes <input type="radio"/> no
Delete	

Recommendation #3	
Title:	<input type="text"/>
First Name*:	<input type="text"/>
Middle Name:	<input type="text"/>
Last Name*:	<input type="text"/>
Email*:	<input type="text"/>
Waive Access*:	<input type="radio"/> yes <input type="radio"/> no
Delete	
+ Add Additional Reference (Optional)	

[Save & Continue](#)

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Application for Institutional Partnerships

Application Number: 570421896

Optional Statistics

Questions asked in this section are accessed by the GPP only and used only for statistical purposes on large populations. The admission committee does not have access to this section.

Ethnicity:

Race:

Gender: Male Female

Recruitment: How did you learn about the GPP?

[Save & Continue](#)

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ARTiE APPLICATION REGISTRATION
TRACKING & EVALUATION

GRADUATE PARTNERSHIPS PROGRAM

OFFICE OF INTRAMURAL TRAINING & EDUCATION - NATIONAL INSTITUTES OF HEALTH

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NIH Faculty

My Application

My Profile

RETURN TO MY APPLICATION

RETURN TO LIST (MY APPLICATION)

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- 8 Required Uploads
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Cancel

Save & Continue

Application for Institutional Partnerships

Application Number*: 570421896

Optional Statistics

Questions asked in this section are accessed by the GPP only and used only for statistical purposes on large populations. The admission committee does not have access to this section.

Ethnicity:

Hispanic or Latino

Race:

American Indian or Pacific Islander

Gender:

Male Female

Recruitment:

How did you learn about the GPP?

Email Message

Cancel

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[Cancel](#) [Save & Continue](#)

Application for Institutional Partnerships

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Required Uploads

You must upload PDF files of your transcripts and examination scores. You are welcome to, but are not required to, upload PDF files of any additional material you feel will enhance your application for admission consideration that is not already included elsewhere in your application.

- **Transcripts** - You must upload a PDF file containing an unofficial copy of your transcript for each university listed in your application; one PDF file per university listed. If you attended or are attending an international university and can not obtain a transcripts, have the department chair or registrar write a letter stating you are enrolled at the university, indicating which program and your academic standing.
- **Examination Scores** - You must upload a PDF file of test scores (unofficial scanned images of the results are OK) for each standardized examination taken.

We prefer PDF files to be less than 500kB for ease of upload by you and downloading for review by the admission committees. However, we understand some transcripts are multi-paged or contain very small font sizes that require a higher resolution to ensure clarity. With that in mind, please use the following guidelines when constructing your PDF files:

- **Resolution** - 200dpi
- **Mode** - scan your transcript as line-art, black-white, or grey scale

If you have any difficulties creating or uploading the PDF files please contact the GPP for assistance at gpp@nih.gov or complete the 'Ask A Question' box within the Application Interface.

Academic Documents: Unofficial Transcripts:

Alpha University [Choose File](#)

Additional Document(s):
You can use this area to upload additional documents requested by the GPP.

[Add Document](#)

[Cancel](#) [Save & Continue](#)

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Application Status

PARTNERSHIP SELECTION

- No Partnership Selected - 1

- No Partnership Selected - 2

NIH Intramural MD/PhD Consortia - NIH
Intramural MD/PhD - Track 3

Recommendations

Recommendation #1

Mr. Alpha A-Lastname
unsent

Recommendation #2

Ms. Beta B-Lastname
unsent

Recommendation #3

Dr. Gamma G-Lastname
unsent

Uploads

Unofficial Transcripts:
Alpha University

Ask a Question

Use the form below to submit a question or comment. Please save your application before submitting a question.

Subject:

Body:

[Submit Question](#)

Recommendation Form

Recommendation

The NIH Graduate Partnerships Program (GPP) asks you to complete the evaluation form and submit a letter of recommendation to assess the student's potential to excel in graduate school and as a future scientist.

Please contact the GPP if you have any questions or concerns (gpp@nih.gov).

Evaluation Form

The Evaluation Form asks for your assessment on several aspects using the following rating system:

- 0-Stars = Not Able to Observe
- 1-Star = Below Average - Bottom 50%
- 2-Stars = Average - Top 50%
- 3-Stars = Above Average - Top 25%
- 4-Stars = Excellent - Top 10%
- 5-Stars = Exceptional - Top 1%

In addition to these elements, please provide a brief description on how long you have known the student and in what capacity.

Length*:

How long have you known the applicant?

Capacity:

In what capacity have you known the applicant?

Overall Impression:

Verbal Ability:

Confidence:

Maturity:

Intelligence:

Writing Ability:

Initiative:

Analytical Ability:

Interpersonal Skills:

Honesty:

Research Ability:

Motivation:

Knowledge of Field:

Recommendation Letter

We are able to accept recommendation letters in two formats: uploaded PDF file or text pasted into the text-box provided. If you elect to use the text-box you should use the Paste-As-Plain-Text icon in the edit tools provided to ensure special characters and carriage returned are retained.

Uploaded Recommendation Letter:

Upload Letter of Recommendation.

File:

 no file selected

Recommendation Letter*:

Copy/Paste Letter of Recommendation

B *I* U | | | | |

Path:

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Save & Continue

Registration for Individual Partnerships

Contact Information

The information requested in this section is used to establish methods for contacting you throughout the application and admission process. Please make sure all information submitted is correct, especially email and phone numbers.

First Name: (Given Name)

Middle Name:

Last Name: (Family Name)

Email*:

Phone Number:

Address*:

Street:

City:

State:

Zip:

Country:

Password: For security purposes, the password must meet the following criteria:
1. Must be between 8 and 14 characters
2. Must contain **1 of each** of the following:
• Lower case letter • upper case letter • number • special character (i.e. !, %, ^)

Verify Password: Enter the password again

Save & Continue

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Registration for Individual Partnerships

Registration Number*: 570423405

Personal Information

Registrants are asked to provide details about their birthday, citizenship, and language expertise.

Date of Birth:

Citizenship*:

US Citizen or Permanent Resident?* Are you a US Citizen or a Permanent Resident?
 Yes No

Native Language:

Additional Fluencies:

Save & Continue

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Registration for Individual Partnerships

Registration Number: 570423405

Academic Profile

Submit information about each university / college attended during undergraduate and graduate school, even if you did not obtain a degree from that institution. Details about your PhD program should be entered into fields designated as Graduate University. All other educational information should be listed in chronological order with the most recent enrollment first. You will be able to add as many records as needed to accurately represent your educational history.

Graduate University:

University*	<input type="text"/>
Start Date*	<input type="text"/> <input type="text"/>
End Date*	<input type="text"/> <input type="text"/>
Major Field of Study*	<input type="text"/>
Second Academic Major / Minor:	<input type="text"/>
Degree*	<input type="text"/>
GPA:	Example: GPA = 3.5 <input type="text"/>
GPA Scale:	Example: GPA Scale = 4.0 <input type="text"/>

Educational History:

University*	<input type="text"/>
Start Date*	<input type="text"/> <input type="text"/>
End Date*	<input type="text"/> <input type="text"/>
Major Field of Study*	<input type="text"/>
Second Academic Major / Minor:	<input type="text"/>
Degree*	<input type="text"/>
GPA:	Example: GPA = 3.5 <input type="text"/>
GPA Scale:	Example: GPA Scale = 4.0 <input type="text"/>

 Delete

[+Add New School](#)

If you have GRE, MCAT, or TOEFL examination scores, please include this information so we can generate statistics reports on large populations. If you do not have these scores it is not necessary to take these examinations unless the NIH investigator for dissertation research requests such scores.

Graduate Record Examination (GRE):

Exam Date:

Verbal Reasoning Score:

Verbal Reasoning Percentile:

Quantitative Reasoning Score:

Quantitative Reasoning Percentile:

Analytical Writing Score:

Analytical Writing Percentile:

Analytical Score (pre-October 2002):

Analytical Score (pre-October 2002) Percentile:

Subject Exam Date:

Exam Subject:

Subject Score:

Subject Percentile:

MCAT:

Exam Date:

Verbal Reasoning Score:

Verbal Percentile:

Physical Sciences Score:

Physical Sciences Percentile:

Biological Sciences Score:

Biological Sciences Percentile:

Writing Sample Score:

Writing Sample Percentile:

TOEFL:

Exam Date:

Type of Exam Taken:

Listening Score:

Listening Percentile:

Writing Score:

Writing Percentile:

Reading Score:

Reading Percentile:

Essay Rating:

Essay Percentile:

Total TOEFL Score:

Total Percentile:

Save & Continue 

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NIH Investigator

This section is designed to identify the NIH investigator for dissertation research. We have provided fields for a primary advisor and secondary advisor (if needed). If you do not find the name of the investigator in the drop-down menu you are able to enter his/her name in the open text field provided. Note: The GPP will contact each investigator identified to confirm their willingness to host you in their laboratory.

Primary Investigator*:

Other:

If your investigator is not registered with the GPP, please enter their name below

Secondary Investigator:

Other:

If your investigator is not registered with the GPP, please enter their name below

Secondary Investigator:

Other:

If your investigator is not registered with the GPP, please enter their name below

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Registration for Individual Partnerships

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NIH Information

NIH Administrative Officer:

NIH Institute Center:

NIH Start Date as a PhD Graduate Student:

NIH Address (Building / Room):

NIH Phone Number:

NIH Training Duration:

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Registration for Individual Partnerships

Registration Number: 570423405

Optional Statistics

Questions asked in this section are accessed by the GPP only and used only for statistical purposes on large populations. The admission committee does not have access to this section.

Ethnicity:

Race:

Gender: Male Female

Recruitment: How did you learn about the GPP?

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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.