

GRADUATE PARTNERSHIPS PROGRAM

GPP APPLICATION CENTER

Welcome to the NIH/OITE Graduate Partnerships Program (GPP) Application Center. The GPP Application Center is the entry point for the three online forms used to bring PhD graduate students to the NIH Intramural Research Program for dissertation research.

- Application for an Individual Partnership used by PhD graduate students that are creating an agreement between the NIH and their PhD graduate program; registration for the Individual Partnership pathway of admission
- Application for an Institutional Partnership used by PhD graduate students that have recently matriculated into an NIH-University
 Institutional Partnership that did not require the GPP application for admission consideration; registration form for matriculants
- Application for Institutional Partnerships used by students wishing to enroll in a PhD graduate program; application form requires three letters of recommendation

Through this entry point you may create, modify, and view your GPP application. To begin, create your MyGPP account by completing and submitting the Contact Information form reached via the [Create MyGPP Account] button. If you already have an account, use your login name and password to access your MyGPP Account.

Login (E-mail Address):		
Password (case sensitive):		
Continue L forgot my password?		
First time Graduate Partnerships Program applicant? Create MyGPP Account		







GRADUATE PARTNERSHIPS PROGRAM

MY CONTACT INFORMATION

OMB No. 0925-0299 Expiration Date 08/31/2016 Respondent Burden

Contact Information Enter your contact information in the fields provided. Carefully review your information prior to submission to ensure accuracy. Inaccurate information may adversely affect your application to the NIH/OITE Graduate Partnerships Program (GPP). Name: Mr. ‡ Prefix First Last E-mail Address: **Permanent Home Phone:** Format: (999) 999-9999 **Permanent Address:** City: State: (Use DC for District of Columbia and NA if your permanent address is not in the U.S.) **Zip/Postal Code: Country/Region:** United States Citizenship Status: US Citizen **‡**

Save & Continue Cancel







... home ... for prospective applicants

GRADUATE PARTNERSHIPS PROGRAM

REGISTRATION FORM (SHORT FORM)
OMB No. 0925-0299 Expiration Date
08/31/2016 Respondent Burden

RETURN TO MYGPP I SIGN-OFF

Instructions: Before you begin, you may want to review some helpful hints on using this electronic form and our privacy statement.

Eligibility Criteria:

You must be classified as a matriculant of one of the following NIH-University Institutional Partnerships to complete the NIH/OITE Graduate Partnerships Program (GPP) Application for an Institutional Partnership.

- Individual Partnership
- Centro de Neurosciencias de Valparaiso, Chile Neuroscience / NINDS
- Charles University, Czech Republic Biomedical Research / NICHD
- Chinese University of Hong Kong Biomedical Research / NICHD
- Consortia of Hungarian Universities Biomedical Research / NIAAA
- George Washington University Epidemiology / NCI-DCEG
- Johns Hopkins University Epidemiology / NCI-DCEG
- Karolinska Institute (Sweden) Neuroscience
- Taipei Medial University & China Medical University Neuroscience / NIDA
- University of Maryland, College Park Partnership for Cancer Technology / NCI University
- of Maryland, College Park Sensory and Communication Neuroscience / NIDCD University
- of Montana Molecular Basis for Infectious Diseases / NIAID-RML
- University of Pennsylvania Immunology / NCI
- Wellcome Trust Program / NIH

Application Tips:

This form allows you to save a partially completed application. To take advantage of this feature:

- Enter as much information into the form as you would like.
- Press "Save Partial Application & Quit" to save the information you have entered thus far. You will have to return later to complete your application.
- When you first submit your partial application, you will receive an e-mail message containing instructions for accessing the online tool that allows you to review, modify, and complete your application. Save this e-mail and follow the directions to complete your application.

Only **COMPLETE** applications are available for review by NIH investigators and administrators; partial applications are **not** accessible by NIH investigators. Once you complete your application, press "Preview Completed Application." You will be taken to a page displaying the information you have provided. **To submit your completed application, you must select the "Save" button on the Preview page.**

1. Please read the "Graduate Partnerships Program" page before beginning your online application.

- 2. Be sure that the e-mail addresses you provide are accurate. Incorrect e-mail addresses will delay the processing of your registration.
- 3. Please note that this form accepts plain text inputs only. This means that special characters and formatting such as bullets, "smart quotes," bold or italic fonts, Greek letters, etc., will be lost or altered. To ensure your data appear as you intend, compose your inputs to the longer fields on this form using a plain text editor (e.g., Notepad for PC users or TextEdit for Mac users). In place of special formatting, you will need to rely on the use of capital letters, white space, asterisks, and other standard keyboard characters.
- 4. Proofread your registration thoroughly for accuracy and completeness; false or inaccurate information may be grounds for denying your candidacy or removing you from the program.

Note: All sessions will automatically expire after 30 minutes of inactivity. To prevent losing your changes please save your application frequently or submit your application within 30 minutes.

Indicates a required field.

Partnership This is the NIH/OITE/GPP application for partnerships. If you are not a matriculant				
Partnership Type:		÷ •		
Academic Information Provide information about your PhD prog	gram and professional degree p	rogram, if applicable.		
PhD Degree Academic Information This section is required.				
College/University Name:		•		
Start Date:	÷ ÷ •			
Anticipated Graduation Date:	÷ ÷ •			
Major Field of Study:		•		
University Mentor 1:		•		
University Mentor 2:		(if applicable)		
Have you been awarded or are you currently working towards an MD, DDS, DVM, or RN degree? • Yes No				
MD or DDS or DVM or RN Institution This section is required if you indicated above	ve that you have or are enrolled in	an MD or DDS or DVM or RN degree.		
Degree Program:	‡			
College or University Name:		•		
Major Field of Study:	5	•		
Start Date:	÷ •			
Anticipated Graduation Date:	÷ •			
NIH Training Information				

The information required below is about	the NIH Investigator for dissertation research and NOT the University Professor.
NIH Institute-Center:	÷ •
NIH Mentor 1:	(Tenured / Tenure–Track NIH Investigator)
NIH Mentor 2:	(if applicable)
Start Date at NIH as a Graduate Student:	
Anticipated Duration of Training:	•
NIH Administrative Officer:	
Will / Williams tractive officers	
Additional Information	
Please enter any additional information. (U Please do not place hard returns at the end o designed to automatically wrap text.	Up to 1500 characters) of each line – it is only necessary at the end of paragraphs. The open text fields are
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Notice to all applicants:

It is your responsibility to ensure that all of the above information is correct. False or inaccurate information contained in this application or provided during an interview may be grounds for denying your candidacy or removing you from the program.

Failure to wait for the confirmation webpage will result in an unsuccessful upload. Please be patient.

Save Partial Application & Quit Preview Completed Application

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