

POSTBACCALAUREATE IRTA PROGRAM

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

PROGRAM APPLICATION

Before you begin, watch a new video: Applying to the NIH Postbac Program.

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

This form allows you to save a partially completed application. To take advantage of this feature, please proceed as follows:

- Complete the first section of the form and enter as much additional information into the form as you would like.
- Press "Save Partial Application & Quit" to save the information you have entered thus far, and return later to complete your application.
- When you first submit your partial application, you will automatically receive a confirmation e-mail containing login information and instructions for accessing the online tool that allows you to review, modify, and complete your application.

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 then click the "Save" button on the Preview page.

IMPORTANT NOTE: NIH investigators and administrators can access **completed** applications only; they cannot review partial applications.

Tips for Applying Successfully:

- 1. To apply most efficiently to the Postbac IRTA program, review the <u>Postbac IRTA program description</u> and the associated "<u>Frequently Asked Questions</u>" before beginning your online application.
- 2. Be sure that the e-mail addresses you provide for your references are accurate. Incorrect e-mail addresses will delay the processing of your application and could result in your application's not receiving full consideration.
- 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 appears as you intend it to, 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 application thoroughly for accuracy and completeness; false or inaccurate information may be grounds for denying your candidacy or removing you from the program.
- 5. Complete your application as soon as possible and encourage your references to submit their letters promptly using our online system.
- 6. NOTE: There is no deadline for applying to the Postbac IRTA program; applications are accepted on a rolling basis.

Eligibility Criteria:

- 1. All candidates must be U.S. citizens or permanent residents.
- 2. Candidates for the Postbac IRTA Program must be
 - college graduates who received their bachelor's degrees less than THREE years prior to the date they begin the program,
 - individuals who are more than 3 years past the receipt of their bachelor's degree but received a master's degree less than SIX MONTHS before they begin the program, or

- students who have been accepted into graduate or professional (medical, dental, pharmacy, veterinary, etc.) school and who have written permission from their school to delay entrance for up to one year to pursue a biomedical research project at the NIH
- 3. All candidates must intend to apply to graduate or professional (medical, dental, pharmacy, nursing, veterinary) school during their tenure at the NIH.
- 4. You may not apply more than NINE MONTHS before you expect to receive your bachelor's and/or master's degree.

	Indicates a required field.					
1. Personal Information You must enter this information if you wish to save your application.						
Name:	Mr. ‡ Prefix First MI Last					
Month/Day of Birth:	/ (mm/dd)					
E-mail Address:	Format: user@server.com					
Preferred Phone Number:	• Format: (999) 999–9999					
Citizenship Status:	US Citizen 💠 •					
Bachelor's Degree Date:	/ Month and Year Degree Received/Expected (mm/yyyy) •					
Master's Degree Date (if applicable):	/ Month and Year Degree Received/Expected (mm/yyyy)					
I have been accepted into graduate or professional (medical, dental, pharmacy, veterinary, etc.) school and have written permission from my school to delay entrance for up to a year to pursue a biomedical research project at the NIH. Yes No						
Personal Information - Continued						
Permanent Address:	•					
Address Line 2:						
City:	•					
	(Use DC for District of Columbia and NA if your permanent address is not in the U.S.)					
City:	(Use DC for District of Columbia and NA if your permanent address is not in the U.S.)					
City: State:	(Use DC for District of Columbia and NA if your permanent address is not in the U.S.) United States					
City: State: Zip Code:						
City: State: Zip Code: Country/Region: Permanent Home Phone:	United States					
City: State: Zip Code: Country/Region: Permanent Home Phone:	United States Format: (999) 999–9999 Help: Definition of "relative" Yes No					
City: State: Zip Code: Country/Region: Permanent Home Phone:	United States Format: (999) 999–9999 Help: Definition of "relative" Yes No					

Cumulative GPA	÷ •
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.
Undergraduate Academic Major	
Bachelor's Degree Type	*
Master's Degree: (if applicable)	
Master's Institution	
Cumulative GPA	+
Grading Scale	*
Master's Degree Type	*
Education Plans	
3. Coursework and Grades	Note: Please indicate the degree you plan to pursue after completing your time at NIH.
using the Modify Application tool.	
Course Title	Grade
Course Title	Grade ∠
4. CV/Resume	
4. CV/Resume Copy and paste a plain text version of Include education, relevant research e	your curriculum vitae into this space. Minor reformatting may be necessary.
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5. References		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Once you submit your complete to each of the following individ		for a letter of recommendation will automatically be	sent
Reference 1:			
Name:	Mr. \$	•	
	Prefix First	MI Last	
Address:		•	
Phone:		•	
E-mail:		• Format: user@server.com	
Reference 2:			
Name:	Mr. ‡	•	
	Prefix First	MI Last	
Address:		•	
Phone:		•	
E-mail:		• Format: user@server.com	
Reference 3:			
Name:	Mr. \$	•	
	Prefix First	MI Last	
Address:		•	
Phone:		•	
E-mail:		• Format: user@server.com	

6. Research Interest Keywords:

Please provide a brief list of your research interests (limit 150 characters, including spaces). NIH investigators may search on this field to find applicants whose research interests match their own. You may wish to enter terms that describe particular diseases or conditions (e.g., Alzheimer's disease, macular degeneration, obesity); the techniques you are interested in applying (e.g., two-photon microscopy, patch clamping, rapid sequencing, bioinformatics); or general subject areas (such as epidemiology, public health, molecular neuroscience).

7. Cover Letter:	<u>//</u>
Please write a cover letter outlining your research interests, on NIH.	career goals, and reasons for applying for training at the
	<i>1</i> .
8. Training Locations	
Training occurs on several sites including the main campus in locations where you would be willing to train.	Bethesda, MD. To help our investigators, please indicate ALL
Bethesda, MD (main NIH campus)	
Frederick, MD (some NCI labs)	
Baltimore, MD (most NIA labs and all NIDA labs)	
Research Triangle Park (Raleigh/Durham), NC (NIEHS only)	
Hamilton, MT (limited positions in NIAID)	
Phoenix, AZ (limited positions in NIDDK)	
Detroit, MI (limited positions in NICHD)	
Framingham, MA (limited positions at NHLBI)	
How did you hear about this program? (Please select all th	iat apply.)
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: It is your responsibility to ensure that all of the above information is correct. False or inaccurate information of application or provided during an interview may be grounds for denying your candidacy or removing you from Save Partial Application & Quit Preview Completed Application	
NIH Home DHHS USA.gov About Us Site Search Accessibility Privacy Notice Disclaimers FOIA Contact Us	(J. U <u>81.90/</u>