

Fellowship Application

Now Accepting Fellowship Applications

The CPFP is now accepting fellowship applications for the class entering in June 2021.

The deadline for all applications is 11:59 pm, U.S. Eastern Daylight Time on August 17, 2020. To apply, you must create a fellowship application by following the instructions provided below.



The deadline for all supporting documentation (Lettters of Reference, Letters of Assurance, Proof of Employment) is 11:59 pm U.S. Eastern Daylight Time on August 24, 2020. All supporting documetation must be requested through your application account.

For more information about completing a fellowship application, please see How to Apply.

Creating a Fellowship Application

To create a fellowship application, you must first establish a Login Service Account. Once you have an account, you may complete your application.

Step 1: Request a Login Service Account

To begin a fellowship application, you must first have a Login Service Account. The account allows you to manage your username and password and provides greater security for your personal information.

- . If you do not already have a Login Service Account, then you must request an account. If you have a Login Service Account, then proceed to step 2.
- Please allow 1-2 business days for your account to be approved. You should allow sufficient time to create the account before the August 17, 2020 deadline.
- You will be notified by e-mail when your account has been created.

Request a Login Service Account

Step 2: Begin Your Fellowship Application

Once your Login Service Account has been created, you may begin your fellowship application.

- If this is your first time creating a fellowship application, then you will log in, complete a brief form, and begin your application.
- If you are a returning user who created a fellowship application in a past year, then you will log in. If you have not previously done so, you will then link your Login Service account to your application, and begin. Once the link is made, you will not be asked to do it again.

First Time Applicant

Returning Users: Log In

OMB Number: 0925-0761 Expiration Date: 07/31/2022

Technical support is available Monday through Friday from 9:00 AM to 5:00 PM U.S. Eastern Time. For help, please contact cpfp@imsweb.com.



OMB Burden Statement

OMB No: 0925-0761

Expiration Date: 07/31/2022

Collection of this information is authorized by The Public Health Service Act, Section 411 (42 USC 285a). Rights of study participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. Refusal to participate will not affect your benefits in any way. The information collected in this study will be kept private to the extent provided by law. Names and other identifiers will not appear in any report of the study. Information provided will be combined for all study participants and reported as summaries. You are being asked to complete this instrument so that we can evaluate the effectiveness of it.

Public reporting burden for this collection of information is estimated to average 60 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 (0925-0761) . Do not return the completed form to this address.

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U.S. Department of Health and Human Services | National Institutes of Health | National Cancer Institute | USA.gov

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Request a Login Service Account

IMS Login Service

Apply For A New Account Your new account can be used to log into participating portals and web applications that use the IMS Login Service. Please contact us if you have questions about the process. All fields are required. Profile Information First Name: Last Name: Email Address: If you were invited to create an account by another system, please make sure to use the email address that received the invitation. Verify Email Address: Phone Number: Used for account verification. Choose a Username At least 3 characters long. Letters and numbers only. Username: Usernames are case-sensitive. We recommend using one that's easy to remember such as a combination of your last name and first initial. Choose a Password Passwords must be at least 8 characters long and include characters from at least 3 of the following: Uppercase letters (A-Z) Lowercase letters (a-z) Numerals (0-9) Special characters (! # \$ % & * + = , - . / : ; () < > ? @ \ ^ _ ` ~) Passwords will expire every 60 days. Password: Confirm Password: Security Questions Answers are not case-sensitive. Question One: Answer One: Question Two: Answer Two: Question Three: Answer Three: Why are you requesting an account? Please provide the name of the project or portal you are trying to access. The name of the project administrator/manager/officer would also be useful to help expedite the account approval process. Reason: Privacy Policy IMS, Inc.



First-Time Applicant

Application System

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Create an Application	on Account
You may create a new application account.	count by completing this form. The information that you provide below may be used to contact you in case there is any problem with
All fields are required.	
First Name	Last Name
Aaron	Applicant
Preferred E-mail	Verify Preferred E-mail ■
aaron.applicant@gmail.com	aaron.applicant@gmail.com
Preferred Phone	
555-555-5555	
Create Account Cancel	

Returning Users: Log In

Application System

Log In

The CPFP Application System utilizes Single Sign On (SSO) and can accommodate two types of login credentials:

- IMS Login Service An account authorized by the CPFP to users who do not have an NIH account.
- NIH Network An account used to log into the National Institutes of Health (NIH) Network.

Applicants to the Fellowship Program: First time applicants should follow the instructions on how to apply to the fellowship program.

Need assistance? Send an email to the administrator.

Warning Notice for U.S. Government Systems

- This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal
 guidance for accessing this Government system, which includes (1) this computer network, (2) all computers connected to this
 network, and (3) all devices and storage media attached to this network or to a computer on this network.
- This system is provided for Government-authorized use only.
- Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or civil and criminal penalties.
- Personal use of social media and networking sites on this system is limited as to not interfere with official work duties and is subject to monitoring.
- By using this system, you understand and consent to the following:
 - The Government may monitor, record, and audit your system usage, including usage of personal devices and email systems
 for official duties or to conduct HHS business. Therefore, you have no reasonable expectation of privacy regarding any
 communication or data transiting or stored on this system. At any time, and for any lawful Government purpose, the
 government may monitor, intercept, and search and seize any communication or data transiting or stored on this system.
 - Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

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IMS Login Service

IMS Login Service

This is a service that allows members to log into participating portals and web applications administered by Information Management Services, Inc.

Username:		
Password:		
Please do not bookmark this page	ge.	
Login		
Forgot your username or passw	ord?	
New User? Create an account		

IMS, Inc.

This page is not directly accessible. Please try visiting the home page of the system you are trying to access.

Need assistance? E-mail the <u>administrator</u> and include details about the system you are trying to access.

Home > Create Application

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

Applicant has account, but hasn't

applied yet for this application cycle.

Overview Other Applications

We would like to welcome you back to the Cancer Prevention Fellowship Program application. To create a new application, please click the button below.

Create an Application

Please note the deadlines for your application and supporting documentation.

- The deadline for submitting your application is on or before 11:59 PM, August 17, 2020 U.S. Eastern Daylight Time.
- The deadline for submitting all supporting documentation is on or before 11:59 PM, August 24, 2020 U.S. Eastern Daylight Time.

You cannot update your application from last year. However, you can view your previous year application(s).

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U.S. Department of Health and Human Services | National Institutes of Health | National Cancer Institute | USA.gov

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Home > Other Applications

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

Overview Other Applications

Other Applications

You have applications from other year(s). Please click to navigate to an application.

Application for Entry in 2020

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U.S. Department of Health and Human Services | National Institutes of Health | National Cancer Institute | USA.gov

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applications in previous years.

Applicant has



Begin Fellowship Application

Application System

Fellowship Applic	ation	St	atus: NOT SUBMITTED
Contact Information Citizenship Education Personal Statement Curriculum Vitae How Did You Hear? Feedback <pre></pre>	Contact Information = required field Name Title = First Name = Middle Aaron Degrees (e.g. PhD, MD, MPH,)	le Name Last Name ■ Applicant	Suffix 🔻
Save & Exit	Demographic Information Gender: Male Female Race Date of Birth (mm/dd/yyyy) = City of Birth State/Pro	ovince of Birth Country of Bir ▼	? Why am I being asked for this?
	Home Address Address City Country	State/Province	Zip/Postal Code ■

Lookup Values:

Title: Mr., Ms., Dr. Suffix: Sr., Jr., III, IV, V

Race:

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Black, not of Hispanic origin
- Hispanic
- White, not of Hispanic origin

State/Province:

- U.S. states
- U.S. territories
- Canadian provinces

Why am I being asked for this?

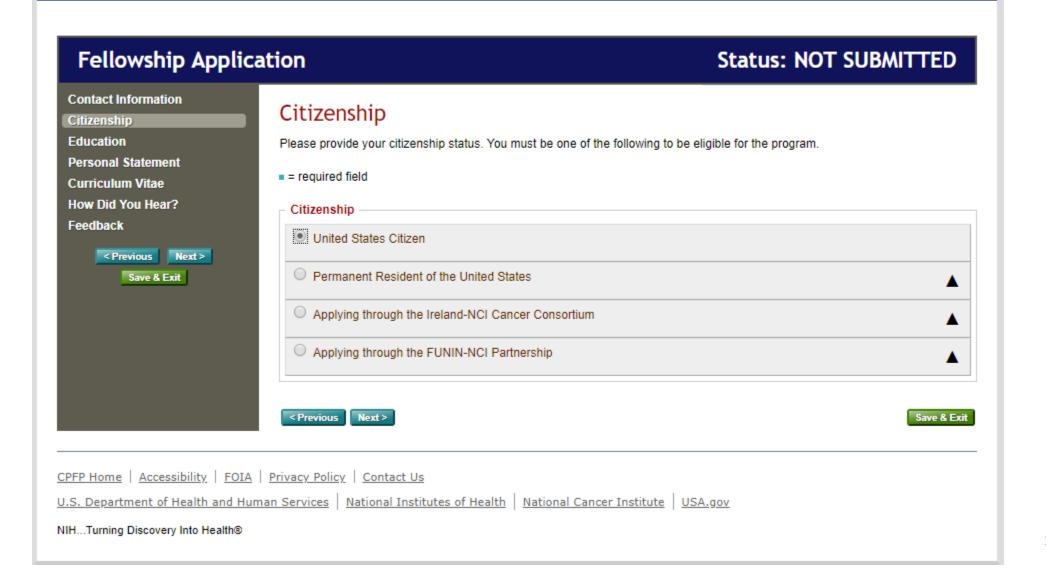
We collect gender, race, birth date, and birth location to form a demographic profile of the applicant pool. We provide this information to reviewers only when summarizing the entire group of applicants.

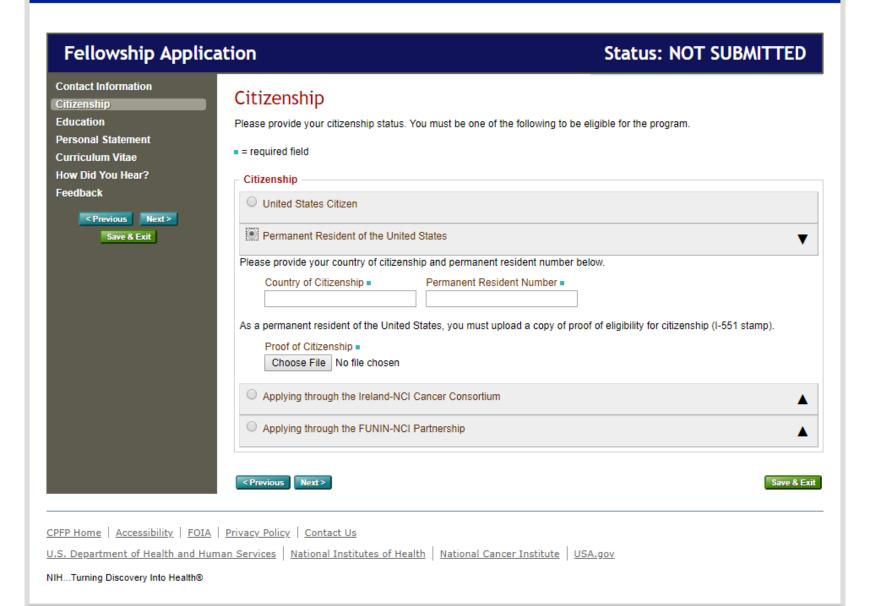
Work/School Address					
Are you currently employed or in g Yes No	graduate school?				•
Position Title ■					
Employer/School ■					
Department/Division					
Address■					
City •		State/Province	•	Zip/Postal Code ■	
Country •			-		
Contact Information ————————————————————————————————————	Alternate Phone		Fax		
555-555-5555					
Preferred E-mail aaron.applicant@gmail.com New Preferred Email	Verify New Prefe	rrod E mail			
Alternate Email	Verify New Freie	ned E-mail			
Revious					Save & Exit
CPFP Home Accessibility FOIA Privacy Policy Contact Us U.S. Department of Health and Human Services National Institutes of H	Health National (Cancer Institute !	USA.gov		

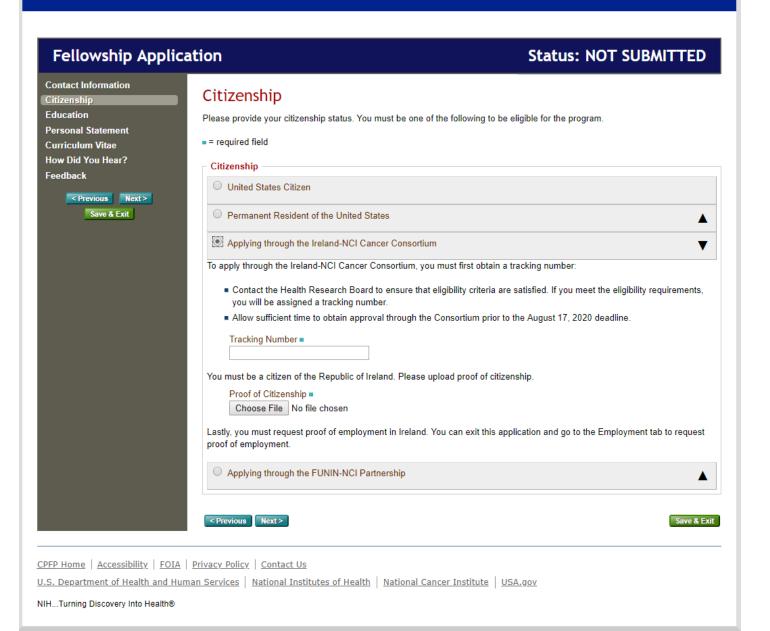
<u>Lookup Values:</u>

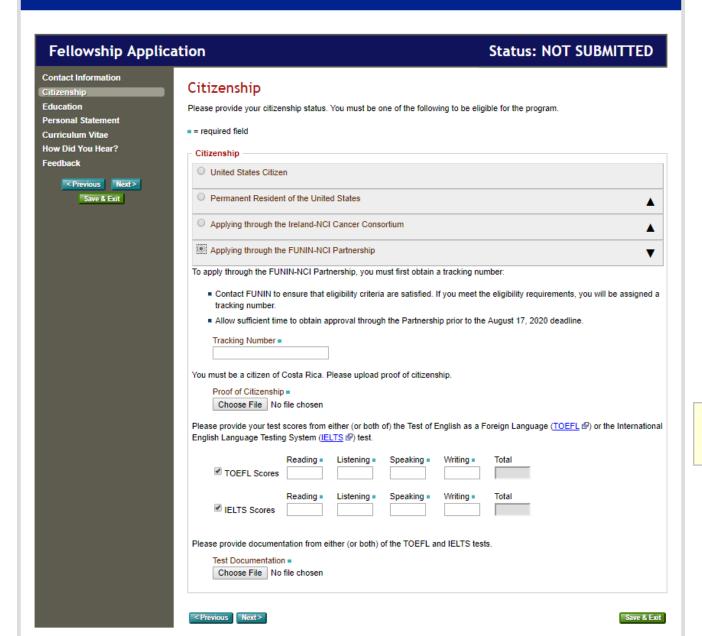
State/Province:

- U.S. states
- U.S. territories
- Canadian provinces



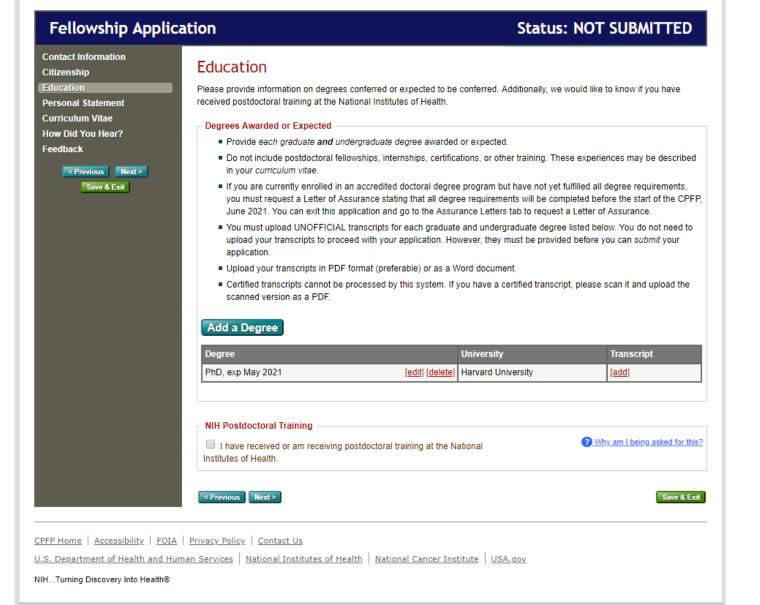






TOEFL link: http://www.ets.org/toefl
IELTS link: https://www.ielts.org/en-us/





Why am I being asked for this?
We are interested in the amount of postdoctoral training you have received or are receiving at the National Institutes of Health because it may affect your eligibility for the fellowship program.

Fellowship Applica	ation Status: NOT SUBMITTED
Contact Information Citizenship Education Personal Statement Curriculum Vitae How Did You Hear? Feedback <- Previous Next > Save & Exit	Add Degree Complete this form for each graduate and undergraduate degree awarded or expected. Do not include postdoctoral fellowships, internships, certifications, or other training. These experiences may be described in your curriculum vitae. Do not include incomplete degrees if you are NOT expecting to receive a degree. This course work may also be described in your curriculum vitae. Am I eligible? required field
	Degree Degree (as it appears on your transcript) ■ If other, please specify: Status ■
CPFP Home Accessibility FOIA U.S. Department of Health and Hum NIHTurning Discovery Into Health®	Department or Division (e.g. "Department of Chemistry") City = State/Province Country = Save Cancel Save Previous Next> Save Exit Privacy Policy Contact Us an Services National Institutes of Health National Cancer Institute USA.gov

Eligibility link: https://cpfp.cancer.gov/fellowship-program/become-fellow/eligibility

Lookup Values for Degree:

Associate's, BA, BS, BSN, Other Bachelor's,

MA, MS, MPH, MSPH, MSN, ScM, Other Master's, MD, MBBS, MBBCh, DVM, DDS, DMS, DO, Other Doctoral (Medical),

PhD, DrPH, JD, ScD,

Other Doctoral (PhD equiv)

Lookup Values for Status:

This degree was Awarded
This degree is Expected

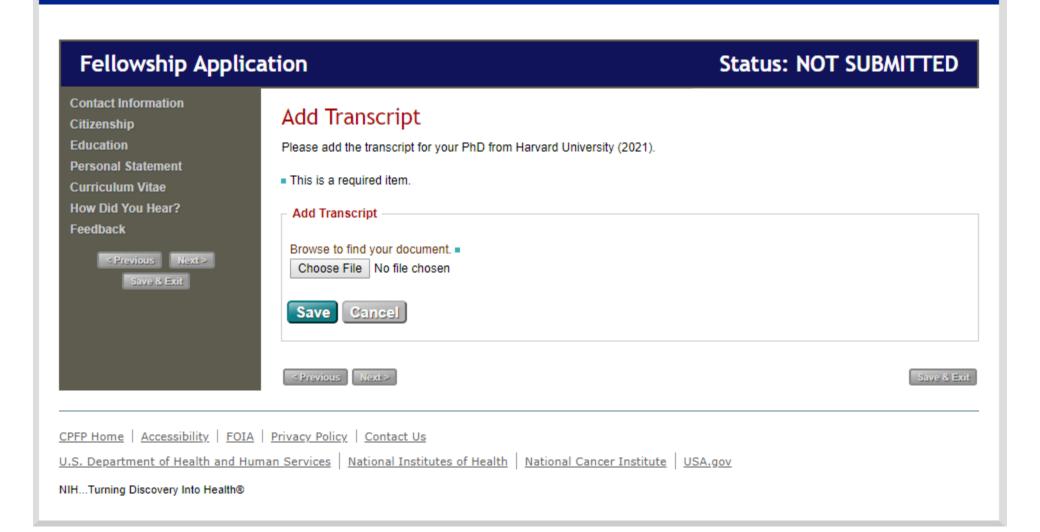
Lookup Values for Month:

January...December

Lookup Values for State/Province:

- U.S. states
- U.S. territories
- Canadian provinces



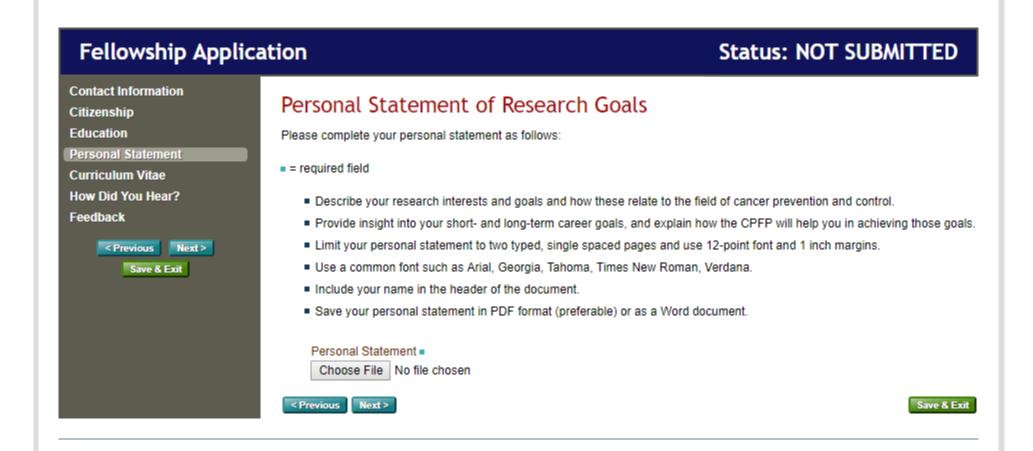


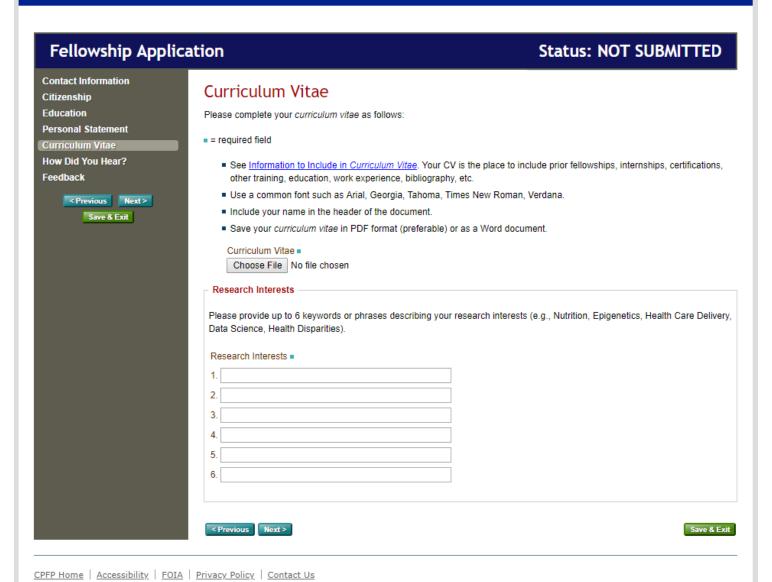


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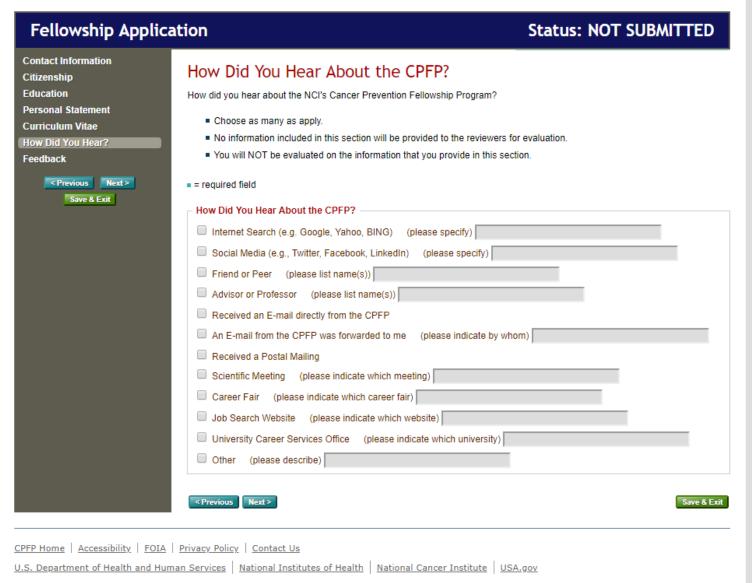
U.S. Department of Health and Human Services | National Institutes of Health | National Cancer Institute | USA.gov



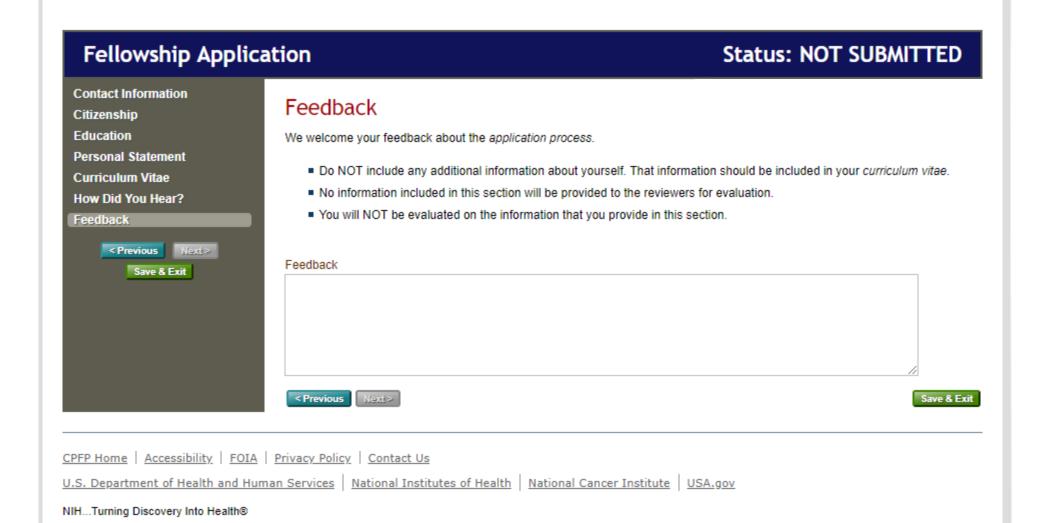


CV link:

https://cpfp.cancer.gov/fellowshi p-program/applicationguidelines/information-includecurriculum-vitae







Home > Overview

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

We have not yet received your online application or all of your required supporting documentation.

- The deadline for submitting your application is on or before 11:59 PM, August 17, 2020 U.S. Eastern Daylight Time.
- The deadline for submitting all supporting documentation is on or before 11:59 PM, August 24, 2020 U.S. Eastern Daylight Time.

Technical Support is now available on Monday - Friday, from 9:00 am to 5:00 pm U.S. Eastern Daylight Time. For support, please contact us at cpfp@imsweb.com.

Overview Application References Assurance Letters Employment

Overview

Your fellowship application portfolio is INCOMPLETE. The following items are required of ALL applicants

Item	Status
Online Application. You must provide your contact information, US citizenship status, educational history, and unofficial academic transcripts. Additionally, you must upload your personal statement of research goals and your curriculum vitae as indicated in the application.	Not Submitted
Go to the <u>Application</u> to edit and submit your application.	
Letters of Reference. You must request current and original letters of reference from four individuals in the scientific/academic community who have knowledge of your scientific accomplishments, motivation, skills, and potential for leadership. Letters of reference from peers are discouraged. If more than four letters are received, only the first four letters will be reviewed.	0/4 received
Go to the <u>References</u> tab to request letters of reference. You may request letters of reference even before your application has been submitted.	

The following items may be required, depending on your situation.

nem	Status
Letter of Assurance (Doctoral degree candidates only).	0/1 received
• If you are currently enrolled in an accredited doctoral degree program but have not yet fulfilled all degree requirements, you must submit a letter assuring that all degree requirements will be completed before the start of the CPFP, June 2021.	
You must request the Letter of Assurance from either the chair of your dissertation committee (e.g., PhD candidates) or the dean of the school (e.g., MD candidates).	
Go to the <u>Assurance Letters</u> tab to request a letter of assurance. You may request a Letter of Assurance even before your application has been submitted.	
Proof of Employment.	0/0 received
■ If you are applying through the Ireland-NCI Cancer Consortium, you must request a letter certifying proof of employment.	
 U.S. citizens and permanent residents of the United States are NOT required to submit proof of employment. 	
■ If you are applying through the FUNIN-NCI Partnership, you are NOT required to submit proof of employment.	
Go to the <u>Employment</u> tab to request proof of employment. You may request proof of employment even before your application has been submitted.	

Home > View Application

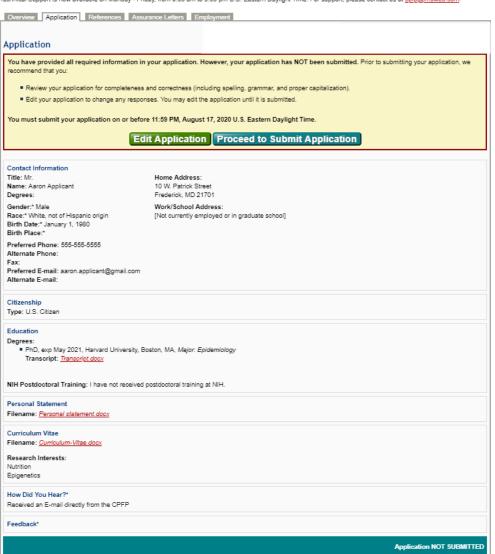
Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

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"No information included in this section will be provided to the reviewers for evaluation. You will NOT be evaluated on the information that you provide in this section.

Home > View Application > Submit Application

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

Received an E-mail directly from the CPFP

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Overview Application References Ass	urance Letters Employment
Application	
Once you submit your application,	
 You WILL NOT be able to change any re- application to be sure it is complete and of 	sponses to your application. Changes will not be accepted via either electronic or postal mail. Please review your porrect before submitting.
	s and your e-mail address on your My Account page.
 You WILL receive an e-mail confirming th 	at your application has been received.
May we make your application available for revi	ew by NIH investigators if you are not selected to participate in the CPFP?
O Yes No	
By submitting this application, I declare that complete.	the information I have provided in this application is, to the best of my knowledge and belief, true, correct, and
Submit Application Now Co	incel
Contact Information	
Title: Mr.	Home Address:
Name: Aaron Applicant Degrees:	10 W. Patrick Street Frederick, MD 21701
Gender:* Male	Work/School Address:
Race:* White, not of Hispanic origin Birth Date:* January 1, 1980 Birth Place:*	[Not currently employed or in graduate school]
Preferred Phone: 555-555-5555 Alternate Phone:	
Fax: Preferred E-mail: aaron.applicant@gmail.com Alternate E-mail:	
Citizenship Type: U.S. Citizen	
Education Degrees: PhD, exp May 2021, Harvard University, 8 Transcript: <u>Transcript docx</u>	Boston, MA, Major: Epidemiology
NIH Postdoctoral Training: I have not received	postdoctoral training at NIH.
Personal Statement Filename: <u>Personal statement.docx</u>	
Curriculum Vitae Filename: <u>Curriculum-Vitae docx</u>	
Research Interests: Nutrition Epigenetics	
How Did You Hear?*	

Home > Reference Letters

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

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Overview Application References Assurance Letters Employment

Letters of Reference

- You must request current and original letters of reference from four individuals in the scientific/academic community who have knowledge of your scientific accomplishments, motivation, skills, and potential for leadership. Letters of Reference from peers are discouraged.
- You must request letters of reference from this page.
- Before requesting a letter of reference, you should contact the individual to see if they will write a letter of reference for you. If so, have them add copfp@imsweb.com to their e-mail contact list to be sure that they will receive the e-mail request from this website.
- You may request letters of reference BEFORE your application has been submitted.
- You will be notified by e-mail when a letter of reference has been received.
- If more than four letters are received, only the first four letters will be reviewed.
- It is your responsibility to ensure that we have received your letters of reference on or before 11:59 PM, August 24, 2020 U.S. Eastern Daylight time.

- Hide the instructions

Request a Letter of Reference

Home > Reference Letters > Request Reference Letter

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

We have received your online application. If you did not receive confirmation that your application was received, then please contact us. For your application to be complete, all required supporting documentation must be submitted.

■ The deadline for submitting all supporting documentation is on or before 11:59 PM, August 24, 2020 U.S. Eastern Daylight Time.

Overview Application References Assurance Let	ters Employment			
Request a Letter of Reference				
■ Enter the name, e-mail, and address of the person from	om whom you are requesting a	letter of reference.		
■ Be sure that you have asked this individual to add cp	fp@imsweb.com to their e-mail	contact list.		
 Click Request to send an e-mail request to the design 	nated individual.			
= required field				
Title First Name Middle Name	Last Name		Suffix	
			•	
Degrees				
E-mail • Verify Email •				
Job Title				
COD TIME				
Institution Department				
nisatuarii Departinent				
Address				
Address ■				
City •	State/Province	Zip/Postal Code		
Country =				
Request Cancel				What happens when I request this?

Lookup Values:

Title: Mr., Ms., Dr. Suffix: Sr., Jr., III, IV, V State/Province:

- U.S. states
- U.S. territories
- Canadian provinces

CPFP Home | Accessibility | FOIA | Privacy Policy | Contact Us

Home > Reference Letters

Contact Us | My Account | Logout (Aaron)

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- You must request letters of reference from this page.
- Before requesting a letter of reference, you should contact the individual to see if they will write a letter of reference for you. If so, have them add cpfp@imsweb.com to their e-mail contact list to be sure that they will receive the e-mail request from this website.
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- Hide the instructions

Request a Letter of Reference

Requested

1. Rhonda Referee, PhD

rhonda.referee@harvard.edu

Professor

School of Public Health

Harvard University

677 Huntington Avenue

Boston, MA 02115

reference letter originally requested on 5/13/2019 at 11:17 AM EDT [resend request]

[withdraw]

Home > Reference Letters

Contact Us | My Account | Logout (Aaron)

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Overview Application References Assurance Letters Employment

Letters of Reference

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- You must request letters of reference from this page.
- Before requesting a letter of reference, you should contact the individual to see if they will write a letter of reference for you. If so, have them add cpfp@imsweb.com to their e-mail contact list to be sure that they will receive the e-mail request from this website.
- You may request letters of reference BEFORE your application has been submitted.
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- Hide the instructions

Request a Letter of Reference

Received

1. Rhonda Referee, PhD

rhonda.referee@harvard.edu

Professor

School of Public Health

Harvard University

677 Huntington Avenue

Boston, MA 02115

Reference Letter.pdf was submitted by Rhonda Referee (rhonda.referee@harvard.edu) on 5/13/2019 at 12:11 PM EDT

Home > Assurance Letters

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

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Overview Application References Assurance Letters Employment

Letters of Assurance

Does this apply to me?

• If you are currently enrolled in an accredited doctoral degree program but have not yet fulfilled all degree requirements, you must request a letter assuring that all degree requirements will be completed before the start of the CPFP, June 2021.

If this applies to me, what do I do now?

- Identify who will write the letter of assurance. We ask that the Chair of your dissertation committee (e.g., PhD candidates) or the Dean of the school (e.g., MD candidates) write the letter.
- Contact the individual to see if they will write the letter of assurance for you. If so, have them add cpfp@imsweb.com to their e-mail contact list to be sure that they will receive the e-mail request from this website.
- Request the Letter of Assurance from this page.
- You may request the Letter of Assurance BEFORE your application has been submitted.
- You will be notified by e-mail when the Letter of Assurance has been received.
- It is your responsibility to ensure that we have received your Letter of Assurance on or before 11:59 PM, August 24, 2020 U.S. Eastern Daylight time.

- Hide the instructions

Request a Letter of Assurance

Pending Degrees Requiring A Letter of Assurance

- Harvard University, Boston, MA
 - PhD, exp May 2021, Harvard University, Boston, MA, Major: Epidemiology

Home > Assurance Letters > Request Assurance Letter

Contact Us | My Account | Logout (Aaron)

Fellowship Application Portfolio

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Overview Application References Assurance Le	etters Employmen	nt		
Request Letter of Assurance				
■ Enter the name, e-mail, and address of the person	from whom you are r	requesting a Letter of Assurance		
Be sure that you have asked this individual to add g				
Click Request to send an e-mail request to the desi The sure that you have asked this individual to add t		their e-mail contact list.		
Click Request to send all e-mail request to the desi	gnateu individual.			
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Request Cancel				? What happens when I request this?

Lookup Values:

Title: Mr., Ms., Dr. Suffix: Sr., Jr., III, IV, V State/Province:

- U.S. states
- U.S. territories
- Canadian provinces

Home > Assurance Letters

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Fellowship Application Portfolio

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- The deadline for submitting all supporting documentation is on or before 11:59 PM, August 24, 2020 U.S. Eastern Daylight Time.

Technical Support is now available on Monday - Friday, from 9:00 am to 5:00 pm U.S. Eastern Daylight Time. For support, please contact us at cpfp@imsweb.com.

Overview Application References Assurance Letters Employment

Letters of Assurance

Does this apply to me?

If you are currently enrolled in an accredited doctoral degree program but have not yet fulfilled all degree requirements, you must request a letter assuring that all degree requirements will be completed before the start of the CPFP, June 2021.

If this applies to me, what do I do now?

- Identify who will write the letter of assurance. We ask that the Chair of your dissertation committee (e.g., PhD candidates) or the Dean of the school (e.g., MD candidates) write the letter.
- Contact the individual to see if they will write the letter of assurance for you. If so, have them add coping@imsweb.com to their e-mail contact list to be sure that they will receive the e-mail request from this website.
- Request the Letter of Assurance from this page.
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- Hide the instructions

Request a Letter of Assurance

Pending Degrees Requiring A Letter of Assurance

- Harvard University, Boston, MA
 - PhD, exp May 2021, Harvard University, Boston, MA, Major: Epidemiology

Requested

1. Alice Advisor, PhD

alice.advisor@harvard.edu

Professor

School of Public Health

Harvard University 677 Huntington Avenue

Boston, MA 02115

assurance letter originally requested on 5/13/2019 at 11:25 AM EDT [resend request]

[withdraw]

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Request a Letter of Assurance

Pending Degrees Requiring A Letter of Assurance

- Harvard University, Boston, MA
 - PhD, exp May 2021, Harvard University, Boston, MA, Major: Epidemiology

Received

 Alice Advisor, PhD alice.advisor@harvard.edu Professor School of Public Health Harvard University 677 Huntington Avenue Boston, MA 02115

Assurance Letter.pdf was submitted by Alice Advisor (alice.advisor@harvard.edu) on 5/13/2019 at 1:53 PM EDT

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Overview Application References Assurance Letters Employment

Proof of Employment

Does this apply to me?

- If you are applying through the Ireland-NCI Cancer Consortium, you must request a letter certifying proof of employment.
- U.S. citizens and permanent residents of the United States are NOT required to submit proof of employment.
- If you are applying through the FUNIN-NCI Partnership, you are NOT required to submit proof of employment.

If this applies to me, what do I do now?

- Contact your employer to see if they will write a letter certifying proof of your employment. If so, have the individual add copp@imsweb.com to their e-mail contact list to be sure that they will receive the e-mail request from this website.
- Request proof of employment from this page.
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- Hide the instructions

Request Proof of Employment



Home > Proof of Employment > Request Employment Document

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Fellowship Application Portfolio

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U.S. Department of Health and Human Services | National Institutes of Health | National Cancer Institute | USA.gov

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Overview Application References Assurance Let	tters Employment		
Request Proof of Employment			
■ Enter the name, e-mail, and address of the person fr	rom whom you are requesting proof	of employment.	
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Title: Mr., Ms., Dr.
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- It is your responsibility to ensure that we have received your proof of employment on or before 11:59 PM, August 24, 2020 U.S. Eastern Daylight time.

- Hide the instructions

Request Proof of Employment

Requested

1. Ellen Employer

ellen.employer@company.com

Supervisor

Company, Inc.

10 Eastern Boulevard

Anywhere, MD 20800

proof of employment originally requested on 5/13/2019 at 11:33 AM EDT [resend request]

[withdraw]

Home > Proof of Employment

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- Hide the instructions

Request Proof of Employment

Received

1. Ellen Employer

ellen.employer@company.com Supervisor

Company, Inc.

10 Eastern Boulevard

Anywhere, MD 20800

Proof of Employment.pdf was submitted by Ellen Employer (ellen.employer@company.com) on 5/13/2019 at 1:59 PM EDT

<u>Home</u> > **Supplement**

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Fellowship Application Portfolio

Supplemental Information
Congratulations on being selected to interview for the Cancer Prevention Fellowship Program. Please upload a recent passport-sized photograph of yourself to help us identify you during the interview process.

= required field

Photograph =

Choose File No file chosen

Supplement

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NIH...Turning Discovery Into Health®

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Lookup Values:

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- Canadian provinces

Contact Us
For more information, please contact us using the form below.
Program Coordinator Cancer Prevention Fellowship Program National Cancer Institute, NIH 9609 Medical Center Drive Room 2W-136 MSC 9712 Bethesda, MD 20892-9712 Phone: (+1) 240-276-5626 Fax: (+1) 240-276-7883 Email: cpfpcoordinator@mail.nih.gov
SUMMER CURRICULUM CONTACT
Summer Curriculum Coordinator Cancer Prevention Fellowship Program National Cancer Institute, NIH 9609 Medical Center Drive Room 2W-136 MSC 9712 Bethesda, MD 20892-9712 Phone: (+1) 240-276-5626 Fax: (+1) 240-276-7883 Email: NCIsummerCurriculum@nih.gov
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E-mail =
Type •
Please Select ▼
Subject •
Comment or Question =
Send Cancel

Lookup values for drop-down: Fellowship Program Summer Curriculum

Policies

Privacy Policy

The following is the Privacy Act Notification Statement for the Cancer Prevention Fellowship Program (CPFP), National Cancer Institute, NIH, DHHS

1. Government Authorization for the CPFP is as follows:

Purpose

Cancer prevention and control is defined as the reduction of cancer incidence, morbidity, and mortality through an orderly sequence from research on interventions and their impact in defined populations to the broad systematic application of the research results. The National Cancer Institute's aim is to reduce the rate of cancer incidence, morbidity, and mortality in the whole population. Achievement of a reduction in cancer mortality rates mandates that scientists and health workers from relevant disciplines and fields be appropriately trained in cancer prevention and control research and applications. The Cancer Prevention Fellowship Program (CPFP) and NCI Summer Curriculum in Cancer Prevention have been developed to provide scientists and other health professionals with advanced training and practical research experiences in cancer prevention and control.

These training programs are authorized by Section 413(b)(3) of the Public Health Service Act, 42 U.S.C. 285a-2(b)(3) as modified by the Health Research Extension Act of 1985 pertaining to the NCI, which states that the Director of the Institute shall" ...support appropriate programs of education and training (including continuing education and laboratory and clinical research training)," and Section 412(2), 42 U.S.C. 285a-1(2) which specifically requires that programs be established for "...the demonstration of and the education of students of the health professions and health professionals in..." areas related to cancer prevention and control.

· Rationale/Justification:

Development of these training programs is mandated by an insufficient number of physicians and scientists who are specifically trained for and prepared to devote their efforts to cancer prevention and control research and practice. While some states, cancer centers, and academic institutions are allocating funds for cancer programs, trained personnel to conduct these initiatives are sorely lacking. Increased technological breakthroughs in epidemiological, basic, and clinical research demand that experienced personnel be in place to build on this explosion of basic knowledge and to research its applicability to cancer prevention and control to reduce disease rates in human populations. At present, academic institutions do not offer specific and/or in-depth training of more that short-term duration in cancer prevention and control and only sporadic workshops and symposia have been developed. The Cancer Prevention Fellowship Program and NCI Summer Curriculum in Cancer Prevention and control.

2. Purpose of Information Collection

The primary use of this information collection is to evaluate an applicant's qualifications for training at the National Cancer Institute's Cancer Prevention Fellowship Program and NCI Summer Curriculum in Cancer Prevention and to process the applications.

3. Routine Uses for Information Disclosure

- In rare circumstances, information may be used to respond to congressional inquiries regarding constituents who have applied to the Cancer Prevention Fellowship Program or NCI Summer Curriculum in Cancer Prevention.
- Information may be used to respond to hospitals and other healthcare organizations seeking verification of training for physicians and other scientists who enroll in the Cancer Prevention Fellowship Program or NCI Summer Curriculum in Cancer Prevention.
- Some requested information will be used for internal program evaluation -- to improve the program and the application process -- and will not be used in the evaluation of the applicant. Information that will not be used in applicant evaluation is indicated in the online application.

4. Is the request voluntary or mandatory?

Application for this program is voluntary; however, for us to process your application, you must complete the required fields.

Related Policies

Disclaimer of Endorsement and Liability