

Application Form

National Science Foundation
Mathematical Sciences Postdoctoral
Research Fellowships

1

CURRENT POSITION

Department _____
Institution _____
Type of Institution _____
Title of Position _____
Date this position started _____
Source of support _____

DOCTORAL DEGREE

Department and Institution _____
Date awarded or anticipated date of receipt _____

PROPOSED FELLOWSHIP INSTITUTION including department and address

PROPOSED SPONSORING SCIENTIFIC ADVISOR OR MENTOR including title, e-mail address, telephone numbers:

(Telephone)

BRIEF TITLE of your proposed research or field of study:

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1

REFERENCES(do not use your mentor).

Name	Department	Institution	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

OTHER SUPPORT

Have you applied for any other fellowships or similar appointments for all or part of the tenure herein requested? ____

If so, name of agency or program _____

Have you ever received any NSF postdoctoral fellowship? _____

If yes, when and from what program? _____

Please provide the following information:

OTHER INSTITUTION AND SPONSOR if short-term international experience is proposed

Application Form (Part B)

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2

TITLE OF RESEARCH PLAN :

1. Provide two-digit classifications of your proposed research according to the classification system list on page 7:

Primary code _____ Secondary areas _____

2. It is normally desirable to select an institution different from where you received your doctoral degree or where you are currently employed; please provide justification (on separate sheet) if your proposed fellowship institution is the same as either of the above. It is not necessary to provide justification if you have been currently employed at your proposed fellowship institution for less than one year and it is not where you received your doctoral degree; if that is the case, please check here: _____

3. Do you plan to use the Fellowship for 18 academic months full-time? _____
or the Instructorship for 9 months full-time and 18 months half-time? _____

If half-time, have you secured a suitable commitment for a teaching position at your host institution?

____ Yes _____ No

4. Specify the area of mathematical science(pure mathematics, applied mathematics, statistics) for your proposed research: _____

The information requested on proposal forms and project reports is solicited under the authority of the National Science Foundation Act of 1950, as amended. The information on proposal forms will be used in connection with the selection of qualified proposals; and project reports submitted by awardees will be used for program evaluation and reporting within the Executive Branch and to Congress. The information requested may be disclosed to qualified reviewers and staff assistants as part of the proposal review process; to proposer institutions/grantees to provide or obtain data regarding the proposal review process, award decisions, or the administration of awards; to government contractors, experts, volunteers and researchers and educators as necessary to complete assigned work; to other government agencies or other entities needing information regarding applicants or nominees as part of a joint application review process, or in order to coordinate programs or policy; and to another Federal agency, court, or party in a court or Federal administrative proceeding if the government is a party. Information about Principal Investigators may be added to the Reviewer file and used to select potential candidates to serve as peer reviewers or advisory committee members. See System of Record Notices, NSF-12, "Fellowships and Other Awards," NSF-50, "Principal Investigator/Proposal File and Associated Records," and NSF-51, "Reviewer/Proposal File and Associated Records." Submission of the information is voluntary. Failure to provide full and complete information, however, may reduce the possibility of receiving an award.

An agency may not conduct or sponsor, and a person is not required to respond to, an information collection unless it displays a valid Office of Management and Budget (OMB) control number. The OMB control number for this collection is 3145-XXXX. Public reporting burden for this collection of information is estimated to average 30 per response, including the time for reviewing instructions. Send comments regarding the burden estimate and any other aspect of this collection of information, including suggestions for reducing this burden, to: Reports Clearance Officer, Office of the General Counsel, National Science Foundation, Alexandria, VA 22314.