

Bioethics Public Reporting Burden Statement

Public reporting burden for this collection of information is estimated to average 20 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 (0925-0698).

Do not return the completed form to this address.

Please e-mail technical questions or comments to Bioethics-Inquiries@mail.nih.gov | [Privacy Policy](#) | [Legal Disclaimer](#)

General Information:

The screenshot shows a web browser window displaying the NIH Bioethics Public Reporting Burden Statement form. The browser address bar shows the URL: bioethicsappsqa.nih.gov/BioethicsApp/Default. The NIH logo and "National Institutes of Health Clinical Center" are visible at the top left. A "Log In" link is at the top right. The form is titled "General Information" and contains the following fields:

- Title:** A dropdown menu with "Dr." selected.
- First Name:** A text input field with the placeholder "Enter First Name".
- Middle Initial:** A text input field with the placeholder "Enter Middle Initial".
- Last Name:** A text input field with the placeholder "Enter Last Name".
- Email Address:** A text input field with the placeholder "Enter Email Address".
- Mailing Address:** A text input field with the placeholder "Enter Mailing Address".
- City:** A text input field with the placeholder "Enter City".
- State:** A dropdown menu with "Select" selected.
- Country:** A dropdown menu with "United States" selected.
- Zip Code:** A text input field with the placeholder "Enter ZipCode".
- Preferred Phone Number:** A text input field with the placeholder "Enter Preferred Phone Number".

Below the fields, there are radio buttons for "Which Program are you applying for?":

- Post-bac Fellowship
- Postdoctoral Fellowship

There is also a "Degrees:" section with a "Post.bac:" dropdown menu set to "Select". At the bottom, there is a text input field for "If Other, please specify:" and three buttons: "Save", "Next", and "Cancel".

On the right side of the form, there is a "Quick Information" box with the following content:

- OMB Number: 0925-0698
- Expire date: 07/31/2020
- Public Reporting Burden Statement
- Quick Information (with a help icon)
- Instructions
- FAQs
- View Application (with an external link icon)
- Mailing Address:
- Coordinator Bioethics Department
National Institutes of Health
Building 10, Room 1C-118
10 Center Drive, MSC 1156
Bethesda, MD 20892-1156

Academic Information:

The screenshot shows the NIH Bioethics Academic Information form. The browser address bar displays "bioethicsappsqa.nih.gov/BioethicsApp/Default?redirect=false&load=true". The NIH logo and "National Institutes of Health Clinical Center" are visible at the top. A navigation menu on the left includes "General Information", "Academic Information" (highlighted), "References", "Documents", and "How did you hear?". The main form area is titled "Academic Information" and contains two sections: "Degree 1" and "Degree 2". Each section includes fields for Degree Type, School Name, City, State, Zip Code, Country, Degree, Discipline 1, Discipline 2, and Year Degree Earned/Expected. A "Quick Information" box on the right provides instructions, FAQs, and application details. The OMB Number 0925-0698 and Public Reporting Burden Statement are also present. The system clock shows 9:45 AM on 4/7/2020.

NIH National Institutes of Health
Clinical Center

General Information
Academic Information
References
Documents
How did you hear?

Academic Information

Degree 1

Degree Type: Select

School Name: Enter School Name

City: Enter School City

State: Select

Zip Code: Enter School Zip Code

Country: United States

Degree: Enter Degree

Discipline 1: Enter Discipline

Discipline 2: Enter Discipline

Year Degree Earned/Expected: Enter Year

Degree 2

Degree Type: Select

School Name: Enter School Name

City: Enter School City

State: Select

Zip Code: Enter School Zip Code

OMB Number: 0925-0698
Expire date: 07/31/2020
Public Reporting Burden Statement

Quick Information

- Instructions
- FAQ's
- View Application
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Coordinator Bioethics
Department
National Institutes of Health
Building 10, Room 10-118
10 Center Drive, MSC 1156
Bethesda, MD 20892-1156

9:45 AM
4/7/2020

References:

The screenshot shows the NIH Bioethics References form. The browser address bar displays "bioethicsappsqa.nih.gov/BioethicsApp/Default?redirect=false&load=true". The NIH logo and "National Institutes of Health Clinical Center" are visible at the top. A navigation menu on the left includes "General Information", "Academic Information", "References" (highlighted), "Documents", and "How did you hear?". The main form area is titled "References" and contains two sections: "Reference 1" and "Reference 2". Each section includes fields for Prefix, First Name, Middle Initial, Last Name, Title, Organization, Phone, and Email Address. Below the "Reference 1" section, there is a "Letter Of Recommendation:" label and a "Last Notification Sent:" section with a checkbox for "Send Reference Email" and a note: "(Please remember that it is only when you have send reference request checked that your references will be contacted.)". The "Quick Information" box on the right is identical to the one in the Academic Information form. The system clock shows 9:45 AM on 4/7/2020.

NIH National Institutes of Health
Clinical Center

General Information
Academic Information
References
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How did you hear?

References

Reference 1

Prefix: Select

First Name: Enter First Name

Middle Initial: Enter Middle Initial

Last Name: Enter Last Name

Title: Enter Reference Title

Organization: Enter Organization Name

Phone: Enter Phone Number

Email Address: Enter Email Address

Letter Of Recommendation:

Last Notification Sent:

Send Reference Email
(Please remember that it is only when you have send reference request checked that your references will be contacted.)

Reference 2

Prefix: Select

First Name: Enter First Name

Middle Initial: Enter Middle Initial

Last Name: Enter Last Name

OMB Number: 0925-0698
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9:45 AM
4/7/2020

Documents:

Instructions

1. Before you begin your application, Please review [Instructions and FAQs](#)
2. Before you begin, you may want to review a statement about privacy
3. If you already have a saved application click on the [Login](#) button at the right top corner.
4. After you fill out the application form below, press the [Save](#) button at the bottom of this page to resume your application later.
5. You **MUST** Press the [Submit](#) button to complete the application process. Review of applications will begin after the deadline.
6. Please press save before continuing to the next page.
7. First Year students are not eligible for this program
8. All required fields are marked with an asterisk*
9. You can review your entire application by clicking [View Application](#) link on [Quick Information](#) Panel.

Notice to all applicants:
Applicants are advised to ensure that all application information is accurate. False or inaccurate information contained in this application may be grounds for denying your candidacy or removing you from the program. Please contact Bioethics-Inquiries@mail.nih.gov if you need assistance or have questions.

General Information

Academic Information

References

Documents

How did you hear?

Statement Of Interest* (PDF documents only)

Upload Statement of Interest File: No file chosen

CV/Resume* (PDF documents only)

Upload CV/Resume: No file chosen

Writing Samples* (PDF documents only)

Upload Writing Samples: No file chosen
(CTRL+Click to upload multiple documents)

Undergraduate Transcript* (PDF documents only)

Upload Undergraduate Transcript: No file chosen
(CTRL+Click to upload multiple documents)

OMB Number: 0925-0088
Expire date: 07/31/2020
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Quick Information

- [Instructions](#)
- [FAQs](#)
- [View Application](#)
- [Mailing Address](#)

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How did you hear?

General Information
Academic Information
References
Documents
How did you hear?

How did you hear about this program?

Please Select all that apply.

Journal Ad; please specify:

Online Job Board; please specify:

Mentor/Advisor, if so who:

Alum (who):

Our Website:

Other; please specify:

Quick Information

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Notice to all applicants:

- Please click the **SUBMIT** button once you complete the application and verified all information is accurate.
- Clicking submit allows you to go back and make changes or additions to your application as often as you want up to the deadline.
- Clicking save also allows edits and additions BUT an application is only complete when it has been **SUBMITTED** and all the required elements, including reference letters, are attached.

Remember:

- You can still edit and update your application after it has been submitted.
- You can submit as often as you want and you should monitor your application to make sure all of your references are in.
- Please remember that it is only when you have "sent reference request" references that your references will be contacted.
- It is your responsibility to ensure that all of the above information is correct.
- False or inaccurate information contained in this application may be grounds for denying your candidacy or removing you from the program.