

OMB Number: 0925-0299  
Expiration Date: 30-June-2022

Please complete all required fields in the form below.

User Type\*:  
 Current NIH Trainee/Fellow  
 NIH Staff Scientist/Staff Clinician  
 Other NIH Staff  
 Guest

NIH ID/Badge Number\*:  
  
[I don't know my NIH ID/Badge number.](#)

Institute/Center (IC)\*:

Campus:

Trainee Type\*:

Current NIH Training Program\*:

Honorary Title: (Mr., Ms., Dr., etc)

First Name\*:

Middle Name:

Last Name\*:

E-mail\*:  
Please provide your e-mail address ending in nih.gov  
[Click here](#) to look up your NIH e-mail address in the NIH Enterprise Directory or NED.

Permanent E-mail\*:

Preferred E-mail Address: Note: The account activation link will be sent to your NIH email address. Once you activate your account, future correspondence will be sent to your preferred email address.  
 NIH  Permanent

Password\*:

Verify Password\*:

Collection of this information is authorized by The Public Health Service Act, Section 410 (42 USC 285). Rights of 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. 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 participants and reported as summaries.

Public reporting burden for this collection of information is estimated to average 3 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 (0925-0299). Do not return the completed form to this address.

OMB Number: 0925-0299  
Expiration Date: 30-June-2019

Please complete all required fields in the form below.

**User Type\*:**

Current NIH Trainee/Fellow  
 NIH Staff Scientist/Staff Clinician  
 Other NIH Staff  
 Guest

**NIH ID/Badge Number\*:**   
[I don't know my NIH ID/Badge number.](#)

**Institute/Center (IC)\*:**

**Campus:**

**Honorary Title:** (Mr., Ms., Dr., etc)

**First Name\*:**

**Middle Name:**

**Last Name\*:**

**E-mail\*:** Please provide your e-mail address ending in nih.gov  
[Click here](#) to look up your NIH e-mail address in the NIH Enterprise Directory or NED.

**Password\*:**

**Verify Password\*:**

Submit Registration      Cancel

Collection of this information is authorized by The Public Health Service Act, Section 410 (42 USC 285). Rights of 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. 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 participants and reported as summaries.

Public reporting burden for this collection of information is estimated to average 30 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 (0925-0299). Do not return the completed form to this address.

OMB Number: 0925-0299  
Expiration Date: 30-June-2019

Please complete all required fields in the form below.

**User Type:**

- Current NIH Trainee/Fellow  
 NIH Staff Scientist/Staff Clinician  
 Other NIH Staff  
 Guest

**NIH ID/Badge Number:**

**Institute/Center (IC)\*:**

**Campus:**

**Current NIH Position:**

**Honorary Title:**

(Mr., Ms., Dr., etc)

**First Name:**

**Middle Name:**

**Last Name:**

**E-mail\*:**

Please provide your e-mail address ending in nih.gov  
[Click here](#) to look up your NIH e-mail address in the NIH Enterprise Directory or NED.

**Password\*:**

**Verify Password\*:**

Collection of this information is authorized by The Public Health Service Act, Section 410 (42 USC 285). Rights of 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. 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 participants and reported as summaries.

Public reporting burden for this collection of information is estimated to average 30 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 (0925-0299). Do not return the completed form to this address.

OMB Number: 0925-0299  
Expiration Date: 30-June-2019

Please complete all required fields in the form below.

**User Type:**

Current NIH Trainee/Fellow  
 NIH Staff Scientist/Staff Clinician  
 Other NIH Staff  
 Guest

**Highest Education Level\*:**

**Current Institution:**

**Honorary Title:** (Mr., Ms., Dr., etc)

**First Name\*:**

**Middle Name:**

**Last Name\*:**

**E-mail\*:**

**Password\*:**

**Verify Password\*:**

Collection of this information is authorized by The Public Health Service Act, Section 410 (42 USC 285). Rights of 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. 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 participants and reported as summaries.

Public reporting burden for this collection of information is estimated to average 30 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 (0925-0299). Do not return the completed form to this address.