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NIDA International Program Drug Abuse Research Fellowship Application

(Must be completed in English)

Fellowship Information

Application Type (Select Only One):

INVEST | INVEST/CTN | INVEST Prevention | NIDA–Inserm

Applicant Information

First/Given Name of Applicant _____

Last/Family Name of Applicant _____

Advanced Degree(s) _____

Applicant Year of Birth (yyyy) _____ Sex or Gender _____

Country of Citizenship (list both if dual citizen) _____

and, if applicable, _____

Phone _____

Primary Email _____

Alternative Email _____

Position Title _____

Name of Applicant's Institution _____

Department, Service, Laboratory, or Equivalent _____

Institution Mailing Address (including city and country)

Permanent Home Address (including city and country)

Applicant's References

Colleague/Supervisor 1 Name (Last/Family, First/Given) _____

Email _____

Colleague/Supervisor 2 Name (Last/Family, First/Given) _____

Email _____

Mentor

Name of Mentor (First/Given Name and Last/Family Name)

Name of Mentor's Institution

Institution Mailing Address (including city and country)

Phone _____ Mentor's Primary Email Address _____

Applicant's Personal History

Education – Please list all postsecondary institutions you have attended, beginning with the most recent.

1) Name and Location of Institution

Title(s) of Theses/Dissertations

Major Field(s) of Study

Diploma or Degree

Dates Attended (MM/YYYY) From _____ / To _____

2) Name and Location of Institution

Title(s) of Theses/Dissertations

Major Field(s) of Study

Diploma or Degree

Dates Attended (MM/YYYY) From _____ / To _____

3) Name and Location of Institution

Title(s) of Theses/Dissertations

Major Field(s) of Study

Diploma or Degree

Dates Attended (MM/YYYY) From _____ / To _____

4) Name and Location of Institution

Title(s) of Theses/Dissertations

Major Field(s) of Study

Diploma or Degree

Dates Attended (MM/YYYY) From _____ / To _____

Additional Training (include NIH-sponsored activities or funding)

1) Activity _____
Field _____
Institution _____
From-To (MM/YYYY) _____ / _____

2) Activity _____
Field _____
Institution _____
From-To (MM/YYYY) _____ / _____

3) Activity _____
Field _____
Institution _____
From-To (MM/YYYY) _____ / _____

4) Activity _____
Field _____
Institution _____
From-To (MM/YYYY) _____ / _____

Current Employment

Name and Address of Current Employer _____
Job Title _____
Employment From-To (MM/YYYY) _____ / _____

Please describe your current job responsibilities

Previous Employment

1) Previous Employer(s) _____

Job Title(s) _____

Employment From-To (MM/YYYY) _____ / _____

Describe your job responsibilities

2) Previous Employer(s) _____

Job Title(s) _____

Employment From-To (MM/YYYY) _____ / _____

Describe your job responsibilities

3) Previous Employer(s) _____

Job Title(s) _____

Employment From-To (MM/YYYY) _____ / _____

Describe your job responsibilities

4) Previous Employer(s) _____

Job Title(s) _____

Employment From-To (MM/YYYY) _____ / _____

Describe your job responsibilities

List of Your Peer-Reviewed Publications (Most Recent 10)

List your significant honors, awards, projects, or other accomplishments.

Applicant's Research Proposal

Fellowship Goals – Please provide a summary of your goals for the fellowship (limit to 500 characters).

Research Proposal Abstract – Please limit your abstract to 2,000 characters.

Explain the research opportunities the institution and mentor offer that are not currently available in your home country. Describe key factors in your selection of your mentor (limit to 1,000 characters).

Applicant's Full Research Plan

Applicants must submit a complete research plan. The plan may not exceed three pages, not including literature citations. The research plan is to be submitted with the fellowship application as a separate document. When creating the research plan, use a standard font, such as Arial or Times New Roman, in 11 points or larger.

Your plan should include:

- 1) Specific aims
- 2) Background and significance
- 3) Research design and methods
- 4) A statement of assurance that research presented in this application will be conducted in compliance with National Institutes of Health (NIH) regulations on the conduct of research.
- 5) Literature citations (each citation must include the authors' names, book or journal title, volume number, page numbers, and year of publication).

Applicant Certification and Acceptance

By checking the box, I _____, declare that I have read and understood the U.S. federal regulations on the conduct of research supported by the National Institutes of Health (NIH). I certify that the statements herein are true, complete, and accurate to the best of my knowledge, and I accept the obligation to comply with the terms and conditions if a fellowship is awarded as a result of this application. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.

An incomplete certification and acceptance section will disqualify your fellowship application.

Mentor Full Information (To be completed by the mentor)

Mentor First/Given Name _____

Mentor Last/Family Name _____

Name of Mentor's Institution _____

Position and Title _____

Department, Service, Laboratory, or Equivalent

Office Phone _____

Office Mailing Address (including city and country)

Primary Email _____

Alternative Email _____

Education

1) Name and Location of Institution _____

Major Field(s) of Study _____

Diploma or Degree _____

Dates Attended (MM/YYYY) From _____ / _____

2) Name and Location of Institution _____

Major Field(s) of Study _____

Diploma or Degree _____

Dates Attended (MM/YYYY) From _____ / _____

3) Name and Location of Institution _____

Major Field(s) of Study _____

Diploma or Degree _____

Dates Attended (MM/YYYY) From _____ / _____

4) Name and Location of Institution _____

Major Field(s) of Study _____

Diploma or Degree _____

Dates Attended (MM/YYYY) From _____ / _____

List up to 10 of your significant publications, honors, awards, or other accomplishments, including current membership on a federal government public advisory committee.

How many pre- and postdoctoral fellows have you trained? _____

In addition to the applicant, how many predoctoral and postdoctoral fellows/trainees will be supervised during the fellowship period? _____

List up to five of the most recent predoctoral and postdoctoral fellows you have trained (e.g., name, current employer, position title).

Mentor's Statement

Mentors must submit a statement not to exceed three pages. The mentor's statement is to be submitted with the fellowship application as a separate document. When creating the statement, use a standard font, such as Arial or Times New Roman, in 11 points or larger.

Your statement should include:

- 1) Describe the Research Plan for the applicant. Include such items as seminars and opportunities for interaction with other groups and scientists. Describe the research environment and available research facilities and equipment. Include information that will help reviewers evaluate the applicant and the proposed research project. Indicate the relationship of the proposed research to the applicant's career. Describe the skills and techniques that the applicant will learn and relate these to the applicant's career goals.
- 2) Describe the applicant's qualifications and potential for a research career.
- 3) Please assess the feasibility of the Research Plan with respect to current NIH regulations on the conduct of research.
- 4) Please describe the applicant's understanding of the U.S. federal guidelines regarding the conduct of research, and how will you ensure that the applicant complies with all NIH and institutional regulations.

Mentor Certification and Acceptance

By checking the box, I _____, declare that I have read and understood the U.S. federal regulations on the conduct of research supported by the National Institutes of Health (NIH). I certify that the statements herein are true, complete, and accurate to the best of my knowledge, and I accept the obligation to comply with the terms and conditions if a fellowship is awarded as a result of this application. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.

An incomplete certification and acceptance section will disqualify your fellowship application.