Global Health Fellows

NORTHERN PACIFIC GLOBAL HEALTH RESEARCH
FELLOWS TRAINING CONSORTIUM

NPGH Global Health Program for Fellows and Scholars Application 2019-2020

Thank you for your interest in the Northern Pacific Global Health Fellows and Scholars Program.

Please complete the application below.

You do NOT need to complete the entire application at one time; you may stop and return at a later time to complete it.

NOTE: In order to return to this survey, you will need the _survey link_ provided when you chose the "SAVE & RETURN LATER" option.

If you do not keep record of the survey link, you will need to start a new application.

CONTACT INFORMATION

First Name:
* must provide value

Middle Name:

Last (surname) Name:
* must provide value

Please provide the address at which you currently reside.

Street Address
* must provide value

City
* must provide value

State

Country

* must provide value

Zip Code

Is your permanent address different than the address provided above?

* must provide value

- ⚪ Yes
- ⚪ No

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Email Address

* must provide value

Telephone Number

* must provide value

Education/Field of Study

Are you a predoctoral (not yet completed terminal degree; current PhD, DVM, MD, MMed student) or postdoctoral (completed terminal degree within the last 3 years) candidate?

* must provide value

Date terminal degree received or expected (MM-DD-YYYYY)

* must provide value

📅 | Today | M-D-Y

What are your current credentials (DDS, DVM, MD, PhD, etc.)? Please provide all.

* must provide value

What is the discipline/specialty of your most recent/current degree (public health, internal medicine, epidemiology, etc)?

* must provide value

Citizenship

Are you a U.S. citizen or permanent resident?

* must provide value

- ⚪ Yes
- ⚪ No

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Affiliation

With which US Institution are you affiliated?

* must provide value

[dropdown]

To which research site you are applying (limit one)?

* must provide value

[dropdown]

What is your skill level in the language of your proposed host country (note: language skills are not a requirement of our program)?

[dropdown]

Funding

We look for opportunities to leverage other funding and resources, so please make sure to disclose any other sources (or potential sources) of funding that you may receive during your fellowship year.

Do you anticipate any potential co-funding for your fellowship year (e.g. T32 fellowship, institutional funding, other grants or fellowships to which you are applying)?

* must provide value

◯ Yes
◯ No

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Have you previously received an NIH Career Development or Research Grant (GRIP, K Award, R01) as Principle Investigator or Co-PI?

◯ Yes
◯ No

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Title of research project

Title of research project

* must provide value

[text box]

Expand

REQUIRED DOCUMENTS

Download the following Word document and upload completed essays below.

Attachment: NPGH_Essays_2019-2020.docx (0.05 MB)

APPLICANT ESSAYS

Upload your completed essays.

⊕ Upload document

TENTATIVE BUDGET

⊕ Upload document

Upload a budget for your proposed study.

Note that funding is limited to $7,500 for pre-doctoral applicants and $10,000 for post-doctoral applicants. If your budget is higher than the amount available, please indicate the source of additional funding.

* must provide value

NIH-STYLE BIOSKETCH

Upload an NIH-style biosketch.

If you need a template, please go to the NIH website: https://grants.nih.gov/grants/forms/biosketch.htm. You may submit any version of the NIH biosketch; many applicants prefer the "fellowship" version.

* must provide value

🔵 Upload document

MENTORSHIP TEAM

Please provide information below regarding your mentors. Letters of support can be uploaded here or emailed directly to ghfmgr@uw.edu.

Mentor #1 Name

* must provide value

Mentor #1 email address

* must provide value

Letter of Support

* must provide value

○ I have a letter of support from mentor #1 to upload

○ My mentor will email a letter of support to ghfmgr@uw.edu

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Mentor #2 Name

* must provide value

Mentor #2 email address

* must provide value

Letter of support

* must provide value

○ I have a letter of support from mentor #2 to upload

○ My mentor will email a letter of support to ghfmgr@uw.edu

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Mentor #3 Name (optional)

	[ ]

Mentor #3 email address

[   ]

Letter of Support
* must provide value

◯ I have a letter of support from mentor #3 to upload

◯ My mentor will email a letter of support to ghfmgr@uw.edu

◯ I will not be submitting a 3rd letter of support

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I grant permission to the Fogarty Program to contact these individuals about my application and my previous professional experiences and conduct.
* must provide value

◯ Yes
◯ No

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Do you have additional letters of support to upload? (optional)
* must provide value

◯ Yes
◯ No

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Upload a photo of yourself in .png or .jpg format.

This will be used for a trainee biography book distributed at orientation.

⊕ Upload document

ADDITIONAL APPLICANT INFORMATION

In order to track the effectiveness of our recruiting efforts and ensure we consider the needs of all our trainees, please consider the following optional questions.

Note: This information will not be included in the review of your application.

Gender

[▼]
We do not discriminate on the basis of gender identity or expression.

Birth Date

[   ] 📅 [Today] M-D-Y
We do not discriminate on the basis of age.

How did you hear about the program?
* must provide value

[▼]

[Submit]

[Save & Return Later]

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A Consortium of University of Washington, University of Hawai'i,
University of Michigan, University of Minnesota & Indiana University

Global Health Fellows
NORTHERN PACIFIC GLOBAL HEALTH RESEARCH
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Full Name:

Surname (Last Name)   *First Name*

Proposed Fellowship Site:

Description of prior research experience and roles on projects

Do not exceed 300 words.

Describe any prior research experience, including your role on research projects (e.g. study coordinator, research assistant, principal investigator, etc.).

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Previous experience in resource-limited settings

Do not exceed 300 words.

Describe your previous experience in resource-limited settings. This may include, but is not limited to, research experience in these settings.

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Statement of career goals and plans

Do not exceed 300 words.

How do you envision your career in 2028? What will you be doing? How will global health fit into these plans?

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Research Proposal Summary

Do not exceed 1200 words not including references.

Please describe a proposed research plan. Include: (1) brief background; (2) specific aims; (3) research design/methodology; (4) significance. Proposals without specific aims will not be reviewed.

Proposed Study Title:

Project Abstract:

Proposal:

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PROJECTED TIMELINE OF FELLOWSHIP

Do not exceed 300 words.

Please succinctly describe the timeline of your proposed fellowship. Time points should include the IRB application process, project preparation and implementation, and other training activities. Please also include your concrete plans to disseminate/publish your results, apply for future funding, and future plans. Gantt charts, if included, do not count against your word limits.

http://fogartyfellows.org/

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MENTORING PLAN

Do not exceed 300 words.

Please briefly describe your primary mentors for your fellowship, their role on your mentoring team, and plans for mentoring interactions during your fellowship year. Please also include why you chose this team of mentors and what characteristics you look for in a good mentor.

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