

Student Traineeship Application Guidelines

Student Traineeships are offered to introduce students to research related to cystic fibrosis and to develop and maintain an interest in this area of biomedicine. An applicant must be a bona fide student in or about to enter a doctoral program (i.e., Ph.D., M.D., M.D./Ph.D.). Senior level undergraduate students planning on pursuing graduate training also may apply. Previous research experience is not a requirement.

Applicants must work with a faculty sponsor on a research project related to cystic fibrosis, the duration of which should be 10 weeks or more.

The amount of the award is \$1,500, and this stipend is paid directly to the trainee. Students receiving traineeships from the Cystic Fibrosis Foundation may reapply for support in a subsequent year.

APPLICATION PROCEDURES

Students must submit the Foundation's Student Traineeship application, including a concise description of the research project, the sponsor's biographical sketch and a letter of support from the sponsor.

Applications are accepted throughout the year, but should be submitted at least two months prior to the projected start date of the project. E-mail the completed application, including the signature page as a PDF attachment, to grants@cff.org. If electronic submission of the signature page is not possible, mail the original to:

Cystic Fibrosis Foundation
Grants & Contracts Office
6931 Arlington Road
Bethesda, MD 20814

AWARD/REPORTING

Applicants will be notified in writing as to the status of their application. Payments will be made directly to the trainee in two equal installments, the first of which will be issued upon receipt of the signed official notice of grant award. The final installment will be issued after submission of a final progress report. This report should include the results and/or achievements of the project and is due within 90 days after completion of the project or the final payment will be subject to forfeiture.

**CYSTIC FIBROSIS FOUNDATION
STUDENT TRAINEESHIP APPLICATION**

Project Title:

Applicant

Name:

Mailing Address:

Phone Number:

Fax Number (if applicable):

E-mail Address:

Sponsor

Name:

Mailing Address:

Phone Number:

Fax Number:

E-mail Address:

Dates of Proposed Project: ____ - ____ - ____ to ____ - ____ - ____

Institution where project will be carried out:

CERTIFICATION AND ACCEPTANCE: WE, THE UNDERSIGNED, CERTIFY THAT THE STATEMENTS HEREIN ARE TRUE AND COMPLETE TO THE BEST OF OUR KNOWLEDGE AND AGREE TO CONFORM TO THE POLICIES AND RULES GOVERNING THIS AWARD.

Signature of Applicant

Date

Signature of Sponsor

Date

Applicant: _____

Sponsor's Biographical Sketch

Name	Title	Birth Date

EDUCATION:

(BEGIN WITH BACCALAUREATE TRAINING AND INCLUDE POSTDOCTORAL WORK)

Institution and Location	Degree	Year	Scientific Field

RESEARCH AND/OR PROFESSIONAL EXPERIENCE: (STARTING WITH PRESENT POSITION, LIST IN CHRONOLOGICAL ORDER PREVIOUS EMPLOYMENT, EXPERIENCE AND HONORS. LIST COMPLETE REFERENCES TO ALL PUBLICATIONS DURING THE LAST THREE YEARS AND ANY PREVIOUS PUBLICATIONS RELEVANT TO THIS APPLICATION. DO NOT EXCEED 2 PAGES.)

Applicant: _____

Project Description

Provide a concise description of the proposed project. Briefly state the hypothesis to be studied, its relationship to cystic fibrosis and the methods to be used. This section should not exceed 2 pages.

Applicant: _____

Sponsor's Letter

Attach a support letter from the sponsor, stating the applicant's educational experience and academic abilities.
