

Lab Address:



APPLICATION FOR FELLOWSHIP SUPPORT

REQUESTED FELLOWSHIP APPOINTMENT TERMS (Check all that apply) ☐ Summer (6/1 - 8/31) ☐ Fall (9/1 - 1/15) ☐ Spring (1/16 - 5/31) % SUPPORT REQUESTED (Check One) TYPE OF FELLOWSHIP (Check all that apply) ☐ 100% ☐ 75% **External Fellowships** Internal Fellowships DOE CSGF HERTZ ☐ MEMP ☐ NTP 50% ☐ HHMI ☐ NDSEG ☐ NSERC ☐ NSF **25%** Other (specify % ☐ Other Fellowship (☐ Other External Fellowship (☐ No (No, I waived through MIT Medical) Students with primary registration at MIT are automatically enrolled. If you have comparable insurance coverage from parent/spouse/partner, you can choose to waive MIT SEIP through MIT Student Health plans by the deadline. Contact Laurie Ward if you have questions. NOTE: Students funded by 9 or 12 month Fellowships only need to submit one fellowship support form for the period. Please select all applicable terms APPLICANT INFORMATION Applicant's Name: Middle Last First Date: ☐ MEMP □ MD MIT ID#: Program: Other (specify): _____ ☐MD/PhD Phone: Term Address: EMail: RESEARCH AND ACADEMIC INFORMATION Research Supervisor: ____ Phone: Address: Email: Lab Name: Lab Institution: Lab Phone:

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Academic Advisor: _	 	 	

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The following must be completed before appointment can be processed:

1. DESCRIPTION OF WORK

You must submit your research information on-line through the HST website each term. Instructions for submitting research can be found at: http://hst.mit.edu/academics/financial-support/submit-research-topic.

2. HUMAN SUBJECTS								
Does your research involve	human subjects as	defined at http://hst.mit.e	edu/academics/financial-support/human-subjects?					
☐ Yes, at MIT		☐ No ☐ Yes, at off-campus institution						
Protocol Number:		Institution:						
Date of last approval:		Date of <u>cede review</u> submission:						
If "Yes", you must provide information requested. Consult http://web.mit.edu/committees/couhes/ for details about how to obtain approval.								
3. VERTEBRATE ANIMAL	S							
Does your research involve support/vertebrate-animals?	live vertebrate anim	nals or their tissues, for fu	rurther details see http://hst.mit.edu/academics/financial-					
☐ No	☐ Yes	CAC Protocol Number	er:					
Date of last approval:								
If "Yes", you must provide a approval. Consult https://ca obtain CAC approval.	protocol number as <u>c.mit.edu/about</u> (red	signed by the Committee quires MIT web and pers	ee on Animal Care (MIT's IACUC) and the date of last sonal certificates to access) for information about how to					
4. INVENTIONS, PUBLICATIONS AND COPYRIGHTS								
This is a reminder that the MIT Inventions and Proprietary Information Agreement (IPIA) form, available at http://tlo.mit.edu/disclose-protect-your-intellectual-property/forms-protect-ip-rights and signed when you started HST, applies to this award.								
5. Applicant's Signature:			Date:					
		FOR HST OFFICE USE	ONLY					
☐ Approved ☐ Not a	Approved	HST Academic Office	Date:/					

HST Academic Office, E25-518
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laurie@mit.edu

Deadlines: Summer 2019—May 24, 2019• Fall 2019—August 23, 2019 • Spring 2020—January 24, 2020 • Summer 2020—May 22, 2020

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