

**National Center for Rehabilitative Auditory Research (NCRAR)
NIH T-35 Summer Research Traineeships for Au.D. Students**

Applications are due by Jan 15, 2017

SUMMER RESEARCH TRAINEESHIP APPLICATION

Name:

Address:

Phone:

Email:

Undergraduate institution:

Location:

Major area(s) of study:

Degree earned and date:

Undergraduate GPA:

Graduate institution:

Location:

Dates attended:

Major area(s) of study:

Advanced degree earned (or expected):

GRE score:

Faculty Advisor:

Advisor's Email:

During the internship you will have a mentor. You will work with your mentor closely during the summer. Please read about each investigator's research on the NCRAR website and then select your top three choices of mentor. We cannot guarantee you'll work with one of these individuals but we will do our best to ensure your interests overlap with those of your mentor.

NCRAR website: <http://www.ncrar.research.va.gov/AboutUs/Staff/Index.asp>

Please rank order your top three choices of mentor.

<input type="checkbox"/> Billings	<input type="checkbox"/> Konrad-Martin
<input type="checkbox"/> Dille	<input type="checkbox"/> Lewis
<input type="checkbox"/> Feeney	<input type="checkbox"/> Molis
<input type="checkbox"/> Folmer	<input type="checkbox"/> Saunders
<input type="checkbox"/> Gallun	<input type="checkbox"/> Papesh
<input type="checkbox"/> Henry	<input type="checkbox"/> Peterka
<input type="checkbox"/> Bramhall	<input type="checkbox"/> Theodoroff

Personal Statement: Please attach a description of your future professional goals. How will a summer research internship contribute to your future goals? (limit to 2 pages)

Application Checklist (please place check mark to indicate completion of each item):

Application Form
 Personal Statement
 CV/resume
 Letter of reference requested from Department Chair confirming enrollment in Au.D. program
 Letter of Reference and evaluation form requested from faculty advisor
 Letter of Reference requested from: one or two other faculty members

I am a US Citizen or permanent resident (*Please note: NIH requires trainees under this program to be US citizens or have permanent resident status*).

Optional questions.

- **Race:** American Indian or Alaska Native Asian Black or African American
Native Hawaiian or Other Pacific Islander Caucasian
- **Ethnicity:** Hispanic or Latino Non-Hispanic
- **Disabilities (if any):** None
- **Disadvantaged background:** Yes No

Please email all documents to gabrielle.saunders@va.gov

Please have all letters of reference emailed to gabrielle.saunders@va.gov