

## VMCVM SVSRP (NIH T35/BIVS) Application

In addition to filling out this application, please send a copy of your resume/CV and two letters of recommendation by email to [rgsvms@vt.edu](mailto:rgsvms@vt.edu) (or sent hard copy to Dr. Ansar Ahmed, c/o Grants and Contracts Officer, College of Veterinary Medicine, 205 Duck Pond Drive, Mail Code 0442, Virginia Tech, Blacksburg, VA 24061). **Applications are due by 5pm on 2/4.**

### Applicant Information

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Current School: \_\_\_\_\_

Current GPA or Class Rank: \_\_\_\_\_

VMCVM students please supply your student number: \_\_\_\_\_

Are you a:

Are you a US citizen, permanent resident, or an international student?

Please check all items below that apply to you.

I am enrolled in a graduate program

Graduate Program/Degree Type:

I have previously received a NIH T35-funded DVM Summer award at any school

I have previously received a Boehringer Ingelheim award at any school

(Colleges and universities are asked by many entities to describe the racial/ethnic backgrounds of our students and employees. In order to respond to these requests, we ask you to please answer the following optional questions.)

**Gender:**

**Ethnic Group:**

- Hispanic
- African American
- Asian or Pacific Islander
- American Indian or Alaskan Native
- Caucasian
- Other:
- Prefer not to answer

## Application

**What are your career plans and goals?**

- Biomedical or clinical research in academia
- Biomedical Research in Pharmaceutical Industry, Government agencies (NIH, USDA, NSF)
- Biomedical Regulatory Agencies in FDA, CDC
- Private Practice
- Other:
- Not sure

**List your education information in chronological order:**

Institution	Years Attended	Degree Received	Major

**Please explain your research interests in a brief paragraph to help us match you with a mentor. (1500 character limit)**

### **Area of Interest Selection**

Please rank your area of interest next to the choices below (1-6, where 1 is your first choice and 6 is your last choice). If you are selected, we cannot guarantee your first choice ("1") but we will do our best to assign that to you. Please see the website for a list of mentors by area and their primary research interests. If you do not see a mentor you are interested in working with on our website, please feel free to send an inquiry to [rgsvms@vt.edu](mailto:rgsvms@vt.edu).

Note: The central theme of grants supporting the SVSRP program is to stimulate interest in biomedical research relative to animal models of diseases.

\_\_\_\_ Immunology and Inflammation

\_\_\_\_ Infectious Disease

\_\_\_\_ Population Health Sciences

\_\_\_\_ Integrative Oncology

\_\_\_\_ Neuropathobiology

\_\_\_\_ Translational & Regenerative Medicine

Your application is not complete until this form, your CV/resume, and two letters of recommendation have been submitted to [rgsvms@vt.edu](mailto:rgsvms@vt.edu) (or sent hard copy to Dr. Ansar Ahmed, c/o Grants and Contracts Officer, College of Veterinary Medicine, 205 Duck Pond Drive, Mail Code 0442, Virginia Tech, Blacksburg, VA 24061). **Applications are due by 5pm on 2/4.**