

**APPLICATION FOR ADMISSION TO
ENVIRONMENTAL LIFE COURSE EPIDEMIOLOGY
TRAINING PROGRAM**

1. NAME: _____

2. MAILING ADDRESS: _____

3. TELEPHONE NUMBER(S): _____

4. EMAIL ADDRESS: _____

5. CITIZENSHIP STATUS:

THE NIMH STIPULATES THAT ONLY "US CITIZENS OR INDIVIDUALS LAWFULLY ADMITTED FOR PERMANENT RESIDENCE MAY APPLY." PERMANENT RESIDENTS MUST SUBMIT A NOTARIZED STATEMENT INDICATING POSSESSION OF THE ALIEN REGISTRATION RECEIPT CARD—1-151 OR 1-551. INDIVIDUALS WITH TEMPORARY OR STUDENT VISAS ARE NOT ELIGIBLE FOR SUPPORT.

ARE YOU A US CITIZEN? YES NO (IF "NO" PLEASE ANSWER BELOW)

OF WHAT COUNTRY ARE YOU A CITIZEN? _____

TYPE OF VISA OR GREEN CARD _____

(IF INFORMATION REQUESTED BELOW IS LISTED ON ENCLOSED CV, PLEASE INDICATE)

6. EDUCATION:

PLEASE PROVIDE INFORMATION REGARDING ALL SCHOOLS ATTENDED AND DEGREES RECEIVED SINCE HIGH SCHOOL. IF MORE SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET TO THE END OF THE APPLICATION.

| SCHOOL | DATES ATTENDED | DEGREE | MAJOR |
|--------|----------------|--------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

7. EMPLOYMENT:

PLEASE LIST ALL EMPLOYMENT (LAST 5 YEARS) RELEVANT TO YOUR APPLICATION TO THIS PROGRAM. IF MORE SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET TO THE END OF THE APPLICATION.

| EMPLOYER | POSITION | DATES OF EMPLOYMENT |
|----------|----------|---------------------|
|----------|----------|---------------------|

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

8. OTHER EXPERIENCE:

PLEASE DESCRIBE OTHER ACTIVITIES OR EXPERIENCE RELEVANT TO YOUR APPLICATION TO THIS PROGRAM. IF MORE SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET TO THE END OF THE APPLICATION.

9. AWARDS:

PLEASE LIST ANY AWARDS, HONORS, FELLOWSHIPS OR GRANTS RECEIVED. IF MORE SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET TO THE END OF THE APPLICATION.

10. OTHER FUNDING:

DO YOU PRESENTLY HAVE OR HAVE YOU BEEN NOTIFIED THAT YOU WILL RECEIVE ANY FELLOWSHIPS OR GRANTS THAT WILL OVERLAP WITH THE TRAINING PROGRAM?

YES NO IF "YES", FROM WHAT SOURCE?

11. PUBLICATIONS (AUTHORS, TITLE, JOURNAL/BOOK, DATE):

IF MORE SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET TO THE END OF THE APPLICATION.

12. PREDOCS ONLY:

WHAT IS YOUR REGISTRATION STATUS AT COLUMBIA UNIVERSITY GRADUATE SCHOOL OF THE ARTS AND SCIENCES?

NOTE: PREDOC CANDIDATES MUST APPLY SIMULTANEOUSLY TO THE DOCTORAL PROGRAM IN EITHER EPIDEMIOLOGY OR ENVIRONMENTAL HEALTH SCIENCES

CURRENTLY REGISTERED _____ DEPARTMENT _____
ADMITTED _____ APPLICATION FOR ADMISSION PENDING _____ OTHER (EXPLAIN) _____

14. ACADEMIC/CAREER GOALS:

STATE IN ONE OR TWO PAGES YOUR ACADEMIC AND CAREER GOALS. PLEASE BE AS SPECIFIC AS POSSIBLE. STATE WHAT TRAINING YOU WISH TO RECEIVE IN THIS PROGRAM THAT WILL FURTHER THOSE GOALS. WHY ARE YOU INTERESTED IN STUDYING ENVIRONMENTAL LIFE COURSE EPIDEMIOLOGY?

16. TRANSCRIPTS:

PLEASE SUBMIT TRANSCRIPTS OF YOUR UNDERGRADUATE AND GRADUATE ACADEMIC RECORDS, GRADUATE RECORD EXAMINATIONS/MEDICAL COLLEGE APTITUDE TEST.

17. LETTERS OF RECOMMENDATION:

PLEASE ARRANGE TO HAVE THREE (3) LETTERS OF RECOMMENDATION SENT TO US BY INDIVIDUALS WHO ARE FAMILIAR WITH YOUR WORK. (PLEASE ASK THEM TO WRITE TO US. WE WILL NOT CONTACT THEM.)

18. OPTIONAL:

YOU MAY SUBMIT REPRINTS OF YOUR PUBLICATIONS, UNPUBLISHED PAPERS FOR COURSES, OR COPIES OF MASTER'S THESES OR DOCTORAL DISSERTATIONS, OR ANY OTHER OF YOUR WRITINGS THAT MAY BE HELPFUL IN EVALUATING YOUR CAPABILITIES AND INTEREST.

DEADLINE FOR APPLICATIONS: JANUARY 1st

Please send completed applications to Dr. Pam Factor-Litvak at prf1@cumc.columbia.edu