

2025 Student Internship Award Application

FACE PAGE

APPLICANT IN	
APPLICANT NAME	ACADEMIC STATUS
	□ Undergraduate □ Graduate
CURRENT INSTITUTION/SCHOOL	☐ Resident ☐ Fellow
	CURRENT MAILING ADDRESS
TELEPHONE	
EMAIL	
SUPERVISOR IN	NEORMATION
SUPERVISOR NAME	DEGREE(S)
JOPERVISOR NAME	
CURRENT ROCUTION TITLE (DEPARTMENT	CURRENT MANUAL ARRESC
CURRENT POSITION TITLE/DEPARTMENT	CURRENT MAILING ADDRESS
TELEPHONE	
EMAIL	
PROJECT INF	ORMATION
PROJECT BUDGET	PROJECT PERIOD
Total Project Budget \$	Start Date
Total Grant Request \$	End Date
	ANIMAL SUBJECTS RESEARCH YES NO
	Animal Welfare Research No:
IRB No. or Status: DSMP Required?	
RECOMBINANT DNA	BIOHAZARDS
Status: Date:	Adequate Protections Assured?
HOST INSTITUTION	
NAME OF HOST INSTITUTION	HOST DEPARTMENT
INSTITUTION EIN OR VATIN NUMBER	INSTITUTION DUNS NUMBER
NAME OF DESIGNATED OFFICIAL	TITLE OF DESIGNATED OFFICIAL
TELEPHONE	CURRENT MAILING ADDRESS
EMAIL	1
SIGNATURES ANI	D ASSURANCES
APPLICANT ASSURANCE: I certify that the statements herein are true, comp the best of my knowledge. I am aware that any false, fictitious, or fraudulent	• • • • • • • • • • • • • • • • • • • •
may subject me to criminal, civil, or administrative penalties. I agree to acc	
the scientific conduct of the project, to provide the required reports, and	
resulting terms if I accept an award as a result of this application.	Date:
SUPERVISOR ASSURANCE: I certify that the statements herein are true, com	plete and accurate to Supervisor Signature:
the best of my knowledge. I am aware that any false, fictitious, or fraudulent	statements or claims
may subject me to criminal, civil, or administrative penalties. I agree to acc	
supervising the scientific conduct of the project, to ensure the required repo	
to comply with any resulting terms if an award is accepted as a result of this	The state of the s
SIGNING OFFICIAL ASSURANCE: I certify that the statements herein are	·
accurate to the best of my knowledge, and agree to comply with any resulting terms if an award is accepted as a result of this application. I am aware that any false, fictitious, or fraudulent	
statements or claims may subject me to criminal, civil, or administrative pen	
2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2	Date:
	1 - 4101

PROJECT SUMMARY (2 pages max, not including references)

2025 NAAF Student Internship Award Application

ABSTRACT (250 words or less; may include 1 figure, figure text excluded from word limit)

ATTACHMENTS

Please combine the following documents with the application in a single pdf for upload.	
	LETTER OF SUPPORT AND MENTORSHIP PLAN A letter of support from the applicant's mentor/supervisor must be provided. This letter should describe how the supervisor will mentor the applicant, detail who will directly supervise the applicant, the frequency of meetings between the applicant and mentor and plans for the applicant to present their research. The letter of support should also describe whether additional funds are available to support the applicant's research plan.
	APPLICANT TRANSCRIPTS Provide an electronic copy of the applicant's transcript from their current institution.
	BIOGRAPHICAL SKETCHES/CURRICULUM VITAE Use the NIH format to provide a biographical sketch of the proposal's mentor/supervisor, and a biographical sketch or curriculum vitae of the applicant. Do not exceed 3 pages per document.
	ADDITIONAL LETTERS OF SUPPORT (optional) Submit up to three letters of support that speak to the ability of the applicant to conduct the proposed research. These letters should discuss the applicant's scientific and clinical abilities, interests, and

potential and attest to their academic qualifications, motivation and commitment.