

Application

GRANTS FOR INNOVATION IN OCCUPATIONAL AND ENVIRONMENTAL HEALTH





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OCCUPATIONAL AND
ENVIRONMENTAL
HEALTH



IMPORTANT

PRIOR TO COMPLETING THIS APPLICATION, READ THE FOLLOWING VERY CAREFULLY..

- PLEASE TYPE OR PRINT LEGIBLY.
- PLEASE PROVIDE ALL INFORMATION. USE EXTRA PAGES IF NECESSARY.
- **NO STAPLES PLEASE.**

FAILURE TO COMPLY WITH THESE INSTRUCTIONS WILL RESULT IN AN INCOMPLETE APPLICATION.
 INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED.

APPLICATIONS DEADLINE ***FEBRUARY 1ST***

I. APPLICANT INFORMATION

TITLE: Mr. _____ Ms. _____ Mrs. _____ Dr. _____

NAME: _____

SOCIAL SECURITY NUMBER: _____

ARE YOU A US CITIZEN? Yes _____ No _____

IF NOT, PLEASE ATTACH A COPY OF YOUR VISA PERMITTING PERMANENT RESIDENCE IN THE UNITED STATES.

PRESENT MAILING ADDRESS:

PERMANENT MAILING ADDRESS:

E-MAIL ADDRESS: _____ (Required. All notifications will be sent electronically.)

HOME PHONE: () _____ **WORK PHONE:** () _____



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II. ACADEMIC INSTITUTION INFORMATION

NAME OF ACADEMIC INSTITUTION: _____

ADDRESS: _____

**IF RESIDENT/STUDENT, DATE OF
GRADUATION *OR* ANTICIPATED DATE
OF GRADUATION:** _____

DEGREE: _____

ACADEMIC MENTOR: _____

PHONE: _____

() _____

III. COLLABORATING CORPORATION/COMPANY

NAME OF COMPANY: _____

SENIOR DIRECTOR: _____

PHONE: _____

() _____

E-MAIL ADDRESS: _____

IV. PROJECT INFORMATION

PROJECT TITLE: _____

**WHO WILL SERVE AS MENTOR FOR
THIS PROJECT?** _____

PHONE: _____

() _____

E-MAIL ADDRESS: _____



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V. ADDITIONAL COMPONENTS

In addition to submitting this application, each applicant must complete the following components in order to apply for the 2003 Pfizer/ACOEM/OEHF Grants for Innovation in Occupational and Environmental Health.

1) Personal Statement

Write a personal statement (not to exceed 2 pages) on why you are interested in this program. Include specific ideas regarding your interest in this opportunity, benefits you expect to receive from the experience, and how the proposed project will advance the field of occupational and environmental health. If you are a resident or fellow, also comment on how this experience will shape your future career plans.

2) Research/Project Proposal

Develop a project proposal (not to exceed 10 pages double-spaced, with a 250 to 300 word abstract). Include the following information in the proposal:

1. Purpose of project
2. Research questions/objectives—specific aims and potential significance
3. Methodology—experimental design, potential problems and solutions, decisions governing the involvement of human subjects, and controls
4. Research/evaluation plan
5. Timeline
6. Sources of data
7. Budget with proposed funding sources

3) Credentials Component

This section includes

- A resume or curriculum vitae (CV)(limited to 3 pages)
- Letter(s) supporting the need for the research project (limited to 4 pages)

4) Letter from Academic Institution

For residents, a letter of support from your academic program must be submitted with your application. This letter should endorse the relationship between the residency program and the proposed project; identify how the project will benefit your training; describe how the research will further the knowledge in the field of occupational and environmental health; and identify institutional resources for the project such as office space, staff commitment and use of data. For other researchers, if an academic institution will be involved in any aspect of the project, e.g. data collection or analysis, a letter from the academic institution outlining their institution's responsibilities must be included.

5) Letter from Corporation/Company

Nonacademic applicants must be sponsored through a corporate setting. A letter from the corporation or company you will be collaborating with, supporting the research initiative, must be submitted with your application. This letter should describe the commitment of the corporation or company and how the activities will be conducted.



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VI. SIGNATURE OF APPLICANT

Signature: _____ **Date:** _____

Print/Type Name: _____

ALL COMPLETED APPLICATIONS MUST BE SENT TO:

**Doris L. Konicki
Executive Director
Occupational and Environmental Health Foundation
1114 North Arlington Heights Road
Arlington Heights, IL 60004**

**IF YOU WISH TO RECEIVE VERIFICATION THAT YOUR COMPLETED PACKAGE HAS BEEN RECEIVED,
PLEASE ENCLOSE A SELF-ADDRESSED STAMPED POSTCARD. THE VERIFICATION POSTCARD WILL
BE MAILED WITHIN 10 BUSINESS DAYS FOLLOWING THE APPLICATION DEADLINE.**

**PLEASE NOTIFY ACOEM IMMEDIATELY, IN WRITING, OF ANY CHANGES IN MAILING
OR E-MAIL ADDRESS.**

**APPLICATION DEADLINE
FEBRUARY 1ST**

PLEASE NOTE:

DO NOT USE STAPLES