**FVSP Faculty Application Checklist-DUE 1/23/2020 5PM EST**

Completed cover page with prior mentorship history

Training/Registration requirements needed

Abstract of proposed work

NIH-format biosketch

**Submission Instructions**

Convert the application to ***one .pdf document.*** Name the file using your last name, followed by an underscore, and your first initial. For example: Hayward\_L.pdf

Submit the following pages, via email attachment, to Dr. Linda Hayward ([haywardl@ufl.edu](mailto:haywardl@ufl.edu)). The subject line should read “FVSP Faculty Application”.

NOTE: If you have a project that advances the health and/or welfare of dogs, cats, horses, llamas, alpacas or wildlife and have talked with a specific student that is very interested in your research, your student may qualify for a **Morris Animal Foundation Scholarship** **(full stipend).** <https://www.morrisanimalfoundation.org/sites/default/files/filesync/VSS-Guidelines.pdf>).

**Please include that student’s name in the application form (only one student name please). The FVSP board will identify one UF application to be submitted to FVSP by 2/12/2020.**

If you do not have a specific student in mind and/or if your project/student is not chosen for this scholarship, all students will still have an opportunity to rank their interest in your project by 2/3/2020 and you will have an opportunity to rank all students for your project. Faculty rankings of student applications are due 2/10/2020. A reminder will be sent out in advance.

The FVSP Research Program runs 5/18/2020 to 7/24/2020 with final research presentations 7/28/2020.

**2020 Florida Veterinary Scholars Program**

**Faculty Application**

|  |  |
| --- | --- |
| **Name** |  |
| **Email address** |  |
| **Proposed project title** |  |
| **Will you provide matching student stipend funding ($2500)?** |  |
| **Source of project/research funding** |  |

**Prior student research mentees (last 5 years, if applicable):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Class** | **Student** | **Project Title** | **Status** |
| e.g. 2017 |  |  | Completed/published/in progress |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**If project qualifies for Morris Animal Foundation Student Scholarship Funding and you have identified a specific interested student, please provide their name and email address**

|  |  |  |
| --- | --- | --- |
| **last name** | **first name** | **email address** |
|  |  |  |

I agree to obtaining all necessary approvals (e.g. IACUC/IRB/EH&S/VHRRC – see below for specifics) to conduct the project with the student PRIOR to the commencement of the summer program, as well as submitting documentation of these approvals to the FVSP board by 5/11/2020

YES/NO

I agree to assisting my student prepare for the summer program during the Spring semester, which will include preparation of a study outline, and training in relevant laboratory techniques

YES/NO

I agree to plan for commencing the experiment/data collection by the beginning of the summer program (5/18/20)

YES/NO

|  |  |  |
| --- | --- | --- |
|  | Needed (Yes/No) | Approval by 5/11/20 (Yes/No)? |
| IACUC Approval and Training |  |  |
| IRB Registration and Training |  |  |
| Biological Agent Registration |  |  |
| Biopath Registration |  |  |
| Veterinary Hospital Research |  |  |
| FERPA Training |  |  |
| Biohazardous Waste Training |  |  |
| Laboratory Safety Training |  |  |

**Abstract of proposed student project** (1 page limit. This should mirror the aims page of a grant and CLEARLY indicate the student’s role.)

OMB No. 0925-0001 and 0925-0002 (Rev. 11/16 Approved Through 10/31/2018)

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

POSITION TITLE:

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

| INSTITUTION AND LOCATION | DEGREE  (if applicable) | Completion Date  MM/YYYY | FIELD OF STUDY |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**A. Personal Statement**

**B. Positions and Honors**

**C. Contributions to Science**

**D. Additional Information: Research Support and/or Scholastic Performance**