



NIDDK Research Scholarship Application PRIMARY DATA SHEET

APPLICATION FORMS MAY BE PHOTOCOPIED

Part I. Personal Information (Please type or print legibly in ink.)

First	Middle	Last
Social Security Number	- -	Date of Birth
Gender (M or F)		Are you a US Citizen
Email Address		
List research interest:		

Part II. Contact Information

Current / Mailing Address

Street			
City			
State	Zip Code		
Phone	Cell Phone		

Permanent Address (if same, please indicate)

Street			
City			
State	Zip Code		
Phone			
Type of Residence:	__Reservation	__Rural	__Urban

Emergency Contact

Contact Name		Relationship	
Home Phone		Cell Phone	

Part III. Education Information

Current / Latest School Information

Name			
Street			
City			
State		Zip Code	
Phone		Fax	

Current School Type (circle the one that applies)

High School	Undergraduate	Graduate	Professional	Completed
-------------	---------------	----------	--------------	-----------

School Year (circle the one that applies)

Freshman	Sophomore	Junior	Senior	Other	
Major / Minor		Degree			
Cumulative GPA		Health career goal			

List Awards, Honors, or Special Achievements

Name of Award/Honor	Date Received	Reason

Part IV. Family Information

Marital Status	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Other	/Number of Dependents	
Spouse's Name						
Place of Birth	City			State		

Part V. Tribal Affiliation

Tribe(s)						
If enrolled in a tribe, please identify						
Tribal Enrollment:	__Self	__Mother	__Father	__Grandmother	__Grandfather	__Other
Blood Quantum	_____4/4	_____3/4	_____1/2	_____1/4	_____Less than 1/4	
Tribal Languages						
Tribal Languages Knowledge	Speak:	Yes	Some	None		
(circle the one that applies)	Understand:	Yes	Some	None		

Part VI. Other Information

Closest / Preferred Airport

Airport City, State	
Airport Name or Code	

Have you applied for the NIDDK before? (circle one that applies) Yes No

NOTICE:

Application must be postmarked by Friday, May 28, 2010. Mail the following contents to the address below:

- NIDDK Application (Primary Data Sheet)
- One-page letter regarding your interest in biomedical research
- Copy of certificate of degree of Indian blood or tribal identification card
- Current Resume / CV
- Recent college / university transcript
- Letter of Recommendation
- Recent Photograph

AAIP mailing address: Association of American Indian Physicians
 Attn. Student Programs – NIDDK Scholarship
 1225 Sovereign Row, Suite 103
 Oklahoma City, OK 73108

Part VII. Programs

Please indicate which program(s) you would like more information about, which program(s) you are currently involved in, and which program(s) you have previously participated in along with the years participated.

NOTE: More information can be found on the AAIP website at: www.aaip.org

Program Name	Applying For	Interested In	Involved In	Past Participant	Years
Pre-Admission Workshop (PAW)					
AAIP Annual Meeting & National Health Conference					
CHNS Physician Shadowing Program					
Patty Iron Cloud National Native American Youth Initiative (NNAYI) <i>STUDENT</i>					
Patty Iron Cloud National Native American Youth Initiative (NNAYI) <i>COUNSELOR</i>					
Cross Cultural Medicine Workshop (CCMW)					
Careers in Health for Native Students (CHNS)					
Health Careers Opportunity Program (HCOP)	X				
Association of Native American Medical Students (ANAMS) – Big Bro, Big Sis Program					
Financial Aid / Scholarships					
Admission Tests					
College [ACT/SAT]	X				
Dental [DAT]	X				
Psychology/Allied Health [GRE]	X				
Medical [MCAT]	X				
Optometry [OAT]	X				
Pharmacy [PCAT]	X				
Physician Assistant [PANCE/PANRE]	X				
National Institutes of Health (NIH) / National Institutes of Diabetes & Digestive & Kidney Diseases (NIDDK Research Training Opportunities					
Spirit of EAGLES Mayo Clinic Research Training Program					
Other:					

Below Line: For Office Use Only

Note: Not all items listed, are required for each program. Please see the program application requirements for exact items needed.

Date Received	Status
Items Received / Completed:	
Personal Data Sheet	Essay / Personal Statement
Resume	Academic Transcript
Recommend Checklist	Recommend Letter
Photo	Phone Interview
Background Check Required?	Background Check Results