

# APPLICATION FORM Presidential Research Grant-II

**Applicant Checklist :** Please submit the following items together to ensure a complete application :

- Application
- Personal Statement (maximum 3,000 words)
- Articles, Publications, Books
- Awards or Accolades
- Three Letters of Recommendation

E-mail completed form with required documentation to: grants@asrn.org

L Deadline: Rolling

#### **1. PERSONAL INFORMATION**

NAME :		EMAIL :	
CURRENT ADDRESS :			
PERMANENT ADDRESS :			
TELEPHONE :		DATE OF BIRTH	:
	Current	PLACE OF BIRTH	:
MOBILE	Permanent		
SEX :	MALE FEMALE		

## **II. CURRENT EMPLOYMENT**

Current Place of E	mployment :		
Address	:		
Current Title	:	Number of years in this position :	
Responsibilities	:		
Supervisor's Name	9:	Supervisor's Telephone :	

#### **③ III. PREVIOUS EMPLOYMENT INFORMATION**

LIST YOUR LAST THREE (3) POSITIONS OF EMPLOYMENT:

Employer	Address	Dates	Title

## **IV. EDUCATIONAL BACKGROUND**

LIST HIGH SCHOOLS, COLLEGES, UNIVERSITIES, AND GRADUATE SCHOOLS ATTENDED; MOST RECENT FIRST.

Institution	Location	Major	GPA	Dates Attended

LIST HONORS, AWARDS, OR OTHER RECOGNITION FOR SCHOLASTIC ACHIEVEMENT.

HAVE YOU, AT ANY TIME PRIOR TO THIS APPLICATION, RECEIVED A NURSING SCHOLARSHIP OR NURSING FELLOWSHIP FROM ANY EDUCATIONAL INSTITUTION? IF SO, LIST NAME OF SCHOOL, TYPE OF SCHOLARSHIP, AND THE AMOUNT.

Institution	Location	Type of Award	Name of Award	Amount

#### V. ADDITIONAL APPLICATION INFORMATION

1. LIST NAMES, POSITIONS, AND ADDRESSES OF THREE INDIVIDUALS (AT LEAST TWO OF WHOM ARE FAMILIAR WITH YOUR WORK) WHO WILL WRITE TO ASRN EVALUATING YOUR ABILITY TO CONDUCT SUCCESSFUL RESEARCH.

2. PROVIDE COPIE OF ANY ARTICLES, PUBLICATIONS, OR BOOKS OR OTHER INFORMATION RELATED TO YOUR RESEARCH.

3. PROVIDE COPIES OF ANY HONORS, AWARDS OR ACCOLADES THAT YOU MAY HAVE RECEIVED.

### VI. BRIEF ESSAY

PLEASE SUBMIT A PERSONAL STATEMENT, NOT TO EXCEED 3,000 WORDS, ON WHY YOU SHOULD RECEIVE THIS ASRN PRESIDENTIAL RESEARCH GRANT.

**Brief Essay**