

**Application for the 2019
Craig H. Nielsen Foundation and OSU Spinal Cord Injury Research Training
Program**

May 5-17, 2019

I. Applicant Information. *Note: Strong preference will be given to applicants with graduate student/postdoc/faculty status. Low priority will be given to undergraduate or research staff (technician) applicants.*

Name: _____ E-mail address _____
Current Position: _____ Present Institution: _____
Work Phone # _____ Fax # _____
Work Address: _____ Home Address: _____

City, State, Zip _____ City, State, Zip _____
Country _____ Country _____

Check one: US Citizen Resident Alien Nonresident Alien (add country of residence)

II. Education (Attach a CV including all positions, awards and publications)

Undergraduate Degree: _____ Institution: _____

Discipline: _____

Graduate Degree: _____ Institution: _____

Discipline: _____

Post-Graduate Training: _____ Institution: _____

Discipline: _____

III. Research Background and Goals: *On a separate page, write a brief statement (500 words or less) describing: (1) your goals and reasons for applying to this course and, (2) your current research projects or interests.*

IV. Primary Research Model: Although all trainees will be exposed to rat & mice techniques, the training program is designed to provide individual specialization for rat **or** mouse research models. Please indicate on which species you prefer for your training to competency:

_____ Rat _____ Mouse

V. Mentor Statement and Signature: Students and post-doctoral trainees **must** include a brief letter (*on a separate sheet*) from a mentor who is supporting your work. Mentors, please include contact information.

VI. Tuition notice and Signature: Please place an **x** in each on each line below and sign the application form.
Note: Tuition reduction may be considered if financial need is documented in the Mentor Statement (V) above.

_____ I understand tuition for this course is **\$4000.00** US. Tuition is due by April 1, 2019.

_____ I understand that room and board are included in the tuition fee

_____ I understand that there is a cancellation fee of \$500 if I withdraw my application after March 15, 2019.

VII. Disability Identification (optional): The OSU Training Program does not discriminate applicants on the basis of disabilities. Applicants who check this box will be contacted for a confidential discussion of appropriate accommodations. Are you an individual with a disability? yes no * This information will remain confidential.

Signature of Applicant: _____ Date: _____

Please tell us where you heard about our program: _____

Full application should be submitted electronically as a PDF to scitp@osu.edu

Deadline: February 8, 2019