Application Process

All applicants are required to submit one original single-sided application to APHL. Supporting documents required for a complete fellowship application include:

- A resume (two pages maximum)
- Two-page narrative as described in Part D
- Postdoctoral research fellowship applicants only: One-page description of your laboratory research objectives
- Three completed “Letter of Recommendation” forms with letters in sealed envelopes
- Official transcripts of undergraduate and/or graduate records
- Optional Information Form (ethnicity and sex)

Please do not staple anything.

Recommendation forms with letters and transcripts should be collected by the applicant and forwarded with the application to APHL. A resume or cover letter alone cannot take the place of an application form. It is the responsibility of the applicant to ensure that all application materials are received at APHL by the deadline. Applications that are incomplete or received after the deadline will not be considered.

Applications will be reviewed by APHL to ensure the applicant meets minimal educational and program requirements. A selection committee evaluates all applications. The most qualified candidates are invited to interview at the CDC in Atlanta. Formal offers are made shortly after the interviews.
EVALUATION AND SELECTION

Evaluation criteria include: reasons for participating in the program, career goals, education, experience, and letters of recommendation. Due to the number of applications received, the fellowship program cannot provide specific feedback to applicants that are not accepted to participate in the interview sessions.

Awards

Final announcements and awards will be made according to the program timeline. The program begins with an orientation session at the CDC in Atlanta.

Assignments

Host laboratory assignments are based on opportunities, program needs, and fellow preference. Fellows prioritize their preference for host laboratory placement, but there is no guarantee that fellows will be assigned to his/her first choice laboratory. Fellows cannot accept an assignment at a host laboratory of current or recent employment.

Privacy Assurance

Application information provided will be used solely for the selection and placement of EID fellows and will be disclosed only to members of the selection committee and APHL and CDC representatives responsible for program administration. Aggregated data based on the application materials may be used in management reports designed to evaluate the direction and progress of the program. There will be no attribution of data specific to individual applicants. Once accepted into the fellowship program, APHL and CDC reserve the right to print and disseminate the names and photographs of EID fellows for use in program marketing.

Equal Opportunity

All applicants will be considered on merit and without regard to race, color, religion, national origin, gender, age, or physical disability. Applicants are encouraged to complete the optional information form included with the application. This information is requested to measure the program’s efficacy in reaching and recruiting a diverse population, and will not be considered part of the application itself.

Prior to completing the application, verify that you fulfill the following eligibility requirements:

- You are currently a citizen of the United States. If place of birth was not within the United States, please provide citizenship documentation such as a photocopy of your US passport.
- You will be able to start your appointment and participate in the orientation session at the CDC in Atlanta according to the program timeline.
APPLICATION CHECKLIST

Before submitting your application please check that the following items have been completed:

- You have enclosed one single-sided original, which includes:
  - Completed application form
  - Resume (two pages maximum)
  - Two-page typed narrative as described in Part D
  - Postdoctoral research applicants only:
    Additional one-page typed description of laboratory research objectives
  - Three completed letters of recommendation in sealed envelopes
  - Official transcripts of undergraduate and/or graduate work
  - Optional information form (not required)

Please do not staple anything.

- Send the application materials to the following address for receipt by the deadline date.

EID Laboratory Fellowship Program
Association of Public Health Laboratories
2025 M Street, NW, Suite 550
Washington, DC 20036

Applications that are incomplete or received after the deadline will not be considered.

APHL is moving.
Effective January 20, 2006 mail all materials to:
8515 Georgia Avenue, Suite 700
Silver Spring, MD 20910
Please check the fellowship you are applying for

☐ Advanced Laboratory Training Fellowship
☐ Postdoctoral Laboratory Research Fellowship

Part A: Personal History

Last Name                                        First Name                                        Middle Name

Current Address

City                                             State                                             Zip Code

Address is current until __________________      Telephone Number(s) __________________              Email Address __________________

Permanent Address

City                                             State                                             Zip Code

Telephone Number (if different from above)

I wish to receive mail at my:  ☐ Current Address    ☐ Permanent Address

Part B: Education

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>City, State</th>
<th>Dates of Study*</th>
<th>Degrees with Dates</th>
<th>Major</th>
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<tbody>
<tr>
<td>Undergraduate</td>
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<tr>
<td>Graduate</td>
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<tr>
<td>Special Study or Training</td>
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* Provide dates of study or training for specialized training programs or extended workshops that are applicable to this program.

Part C: Resume

Please attach a resume (2 pages maximum).
Part D: Plans

Attach a typed narrative, up to two pages, single spaced, addressing each of the following items in order:

1. Why are you interested in a career as a public health laboratory scientist?

2. What are your immediate (3-4 year) plans? What are your long-term career goals?

3. What unique qualities (skills, knowledge, achievements, etc.) would you bring to this program?

4. Describe your laboratory experience and skills.

5. List and describe areas(s) of interest for laboratory training and/or research in emerging or re-emerging infectious diseases.
   For example: list a specific disease agent or category (e.g., foodborne diseases, sexually transmitted diseases, antibiotic-resistant pathogens, vaccine preventable diseases). Describe why this is of interest to you.

6. Postdoctoral research fellow applicants only: include one additional page describing your desired laboratory research objectives for this fellowship.

Part E: Professional Recommendations

It is the applicant’s responsibility to obtain three (3) letters of recommendation using the enclosed forms. Please list references below.

<table>
<thead>
<tr>
<th>Name of Reference</th>
<th>Title and Institution/Employer</th>
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Additional

How did you learn about the EID Fellowship Program? Check the appropriate answer(s) and indicate source.

☐ Journal advertisement: ________________________________

☐ Laboratory director or other staff. Who/Where: ________________________________

☐ Scientific Meeting: ________________________________

☐ Journal article, newspaper, or bulletin board posting: ________________________________

☐ Internet (name site): ________________________________

☐ School career center/academic department. Name of institution: ________________________________

☐ Current or former EID fellow: ________________________________

☐ Other: ________________________________

Signature

With my signature I hereby declare that the information provided on this application is correctly represented to the best of my knowledge. If accepted into the program I agree to allow APHL to publish my photo and other information.

__Signature__

Date
To the Recommender:

The applicant named above is a candidate for the Emerging Infectious Diseases (EID) Laboratory Fellowship Program co-sponsored by the Association of Public Health Laboratories (APHL) and the Centers for Disease Control and Prevention (CDC). We appreciate your honest and objective evaluation of the applicant. Three recommendations are required, and will amount to 30% of an applicant's evaluation. Please complete the chart below and a separate narrative. Your careful consideration of the applicant's ability to benefit from the fellowship program is greatly appreciated. Thank you.

Please complete the following checklist:
In a group of 100 other individuals of comparable experience, please rate the applicant with respect to the following characteristics.

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<thead>
<tr>
<th></th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Outstanding</th>
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<tbody>
<tr>
<td><strong>Breadth of general laboratory science and knowledge</strong></td>
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<td><strong>Acquired laboratory skill and technique</strong></td>
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<td><strong>Ability to communicate information (written/oral)</strong></td>
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<td><strong>Promise as a public health laboratory researcher/leader</strong></td>
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<td><strong>Critical thinking and problem solving skills</strong></td>
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<td><strong>Motivation toward a successful, productive career</strong></td>
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<td><strong>Emotional stability and maturity</strong></td>
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<td><strong>Ability to work with others</strong></td>
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<td><strong>Self reliance and independence</strong></td>
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Please attach a narrative comment that addresses the following three items (not to exceed one page total):
1. How long have you known the applicant and in what capacity?
2. Provide descriptive comments related to the applicant's character, attitude, and scientific ability/potential. Please comment on weaknesses as well as strengths.
3. Describe any special attributes in the applicant that would be relevant to his/her candidacy in this fellowship program and future career goals.

Return this page with the attached narrative to the applicant in a sealed envelope with your signature across the seal. It will be included in the submitted application.
To determine the degree to which applicants of diverse ethnic/racial/disability groups are reached by this announcement, APHL requests applicants check *all* appropriate boxes. Submission of this information is optional and will not affect your application.

### Ethnicity
- White
- African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or other Pacific Islander
- Hispanic/Latino
- Other

### Disability
- Individual with disabilities

### Sex
- Male
- Female