



National Library of Medicine Associate Fellowship Program

INSTRUCTIONS

PLEASE READ CAREFULLY BEFORE BEGINNING APPLICATION

The NLM Associate Fellowship Program application consists of the five parts listed below. All materials **MUST BE TYPED**. Your name must appear on each page. Materials submitted are non-returnable.

- Parts:
1. Structured résumé
 2. Contact information for three references
 3. Narrative questions
 4. Official transcripts for undergraduate and graduate degrees
 5. Applicant data form (optional)

Part 1. Structured Résumé

See attached description of each required section. Include each section listed and no more.

Part 2. References

- a. Contact **THREE** persons who can assess your character and abilities. If you are a recent graduate, one should be a faculty member from the library school you attended. The others should be selected from faculty, employers, or other library/information professionals.
- b. On the application form, list each reference's name, title, address, phone number, and e-mail address. Indicate for how long and in what capacity you have known this reference.

Part 3. Narrative Questions

Develop a narrative statement for each question. At the top of the page for each answer, type your name. Then, type the question to which you are responding in bold type. The narrative statements will be evaluated on content and writing skills.

Part 4. Official Transcripts

(ORDER IMMEDIATELY AND SPECIFY THE APPLICATION DEADLINE)

- a. Direct colleges and universities to forward to ORISE one *official transcript* for each undergraduate and graduate degree earned or about to be earned.
- b. One transcript is acceptable for multiple degrees earned from the same institution.
- c. If transcripts are delayed, you should send photocopies immediately. However, official transcripts are required to complete your application.

SUBMIT THE APPLICATION TO:

Barbara Dorsey, Project Manager
NLM Associate Fellowship Program
Science and Engineering Education, MS 36
Oak Ridge Institute for Science and Education
P.O. Box 117
Oak Ridge, Tennessee 37831-0117

Overnight Address:
1299 Bethel Valley Road
Building SC-200
Oak Ridge, Tennessee 37830

FAX Number: (865) 574-2846

NOTE: Complete Applications, including transcripts and references, are due to ORISE by the application deadline specified on the following Web site:

<http://www.nlm.nih.gov/about/training/associate/applicinfo.html>.

This includes parts of the application received from other sources. Only typed and complete application materials will be acknowledged. Final selection for the Associate Fellowship Program will be made in May. Please use overnight express mail if filing near the deadline.

**National Library of Medicine
Associate Fellowship Program**

APPLICATION

Name _____

Last

First

Middle

Mailing Address _____

City

State

Zip

E-mail

Home phone _____ Work phone _____

I have requested transcripts from (list below):

Institution:	City:	State:

Reference Information: List three persons whom you have asked to complete the attached reference form. Include their names and titles, addresses, phone numbers, and e-mail addresses. Also include how long and in what capacity you have known each.

1. _____

Name	Title
Address	Phone
	E-Mail
Length of time known	Capacity

2. _____

Name	Title
Address	Phone
	E-Mail
Length of time known	Capacity

3. _____

Name	Title
Address	Phone
	E-Mail
Length of time known	Capacity

How did you *first* learn of the NLM Associate Fellowship Program? (Check one)

Poster _____ Faculty/Colleague _____ Placement/Job Database _____ Other _____

Signature _____ Date _____

STRUCTURED RÉSUMÉ

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Instructions: Your structured résumé must address each of the following sections in the prescribed order, if applicable. Each heading should be in bold type. If a heading is not applicable, you must still list it, but indicate "N/A" below the heading.

Continuation pages must have your name in the top right hand corner.

Name
Address
Phone
E-mail

Educational Information (From latest to earliest. Include years attended, date of graduation, degree earned, and major area of study. List expected graduation date if applicable.)

Summary of Significant Work Experience (From latest to earliest. Indicate type of employment, e.g., salaried, hourly, practica, volunteer, and number of hours/week.)

Job Title
Organization/Company
Dates
Number of hours per week
Supervisor's name and phone number
Primary duties and responsibilities

Honors and Achievements

Publications/Presentations

Professional Development (Include CE courses, special training.)

Professional Memberships (Include student organizations, positions held.)

Foreign Language and Computer Skills

Title of Courses Taken in Library School (Clearly indicate courses in progress that are not reflected on transcripts)

SEND TO:

Barbara Dorsey, Project Manager
NLM Associate Fellowship Program
Science and Engineering Education, MS 36
Oak Ridge Institute for Science and Education
P.O. Box 117, Oak Ridge, Tennessee 37831-0117
Telephone number: (865) 576-9975
Fax number: (865) 574-2846

NARRATIVE QUESTIONS

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Please develop narrative statements for the following questions. **Begin each question on a new page.** At the top right-hand corner of the page for each answer, type your name and Social Security number. Then type the questions to which you are responding in bold type, followed by your narrative. The narrative statements will be evaluated on content and writing skills and should not exceed 500 words each.

1. What do you hope to gain by participating in the NLM Associate Fellowship Program?
2. If selected, what will you bring to the NLM Associate Fellowship program?

Send to:

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Oak Ridge Institute for Science and Education
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Oak Ridge, Tennessee 37831-0117
Telephone number: (865) 576-9975
Fax number: (865) 574-2846