



## NIDDK Travel Award Application for NIH/NMA Fellows Attending the National Medical Association's Annual Convention and Scientific Assembly

### Applicant Information

**Full Name** Date

Last Name  First Name  M.I.

Graduate Degrees

#### Organization Address

Street Address

City  State  Zip Code

#### Permanent Address

Street Address

City  State  Zip Code

Phone Number  Email Address

### Career Information

#### Career Status

Post Graduate Year   Resident  Acting Instructor

Assistant Professor  Instructor  Fellow

#### Specialty

Primary Specialty

Secondary Specialty

## Demographic Information

### ***Ethnicity***

- Hispanic or Latino       Not Hispanic or Latino

### ***Race***

- American Indian/Alaskan Native     Asian       Black/African American  
 Native Hawaiian or Other Pacific  
Islander       White/Caucasian     Other/Mixed Race

### ***Citizenship Status***

- U.S. Citizen     Noncitizen National       Permanent Resident of U.S. Pending  
 Permanent Resident of U.S.     Other, U.S. Visa (specify)

### ***Gender***

## Additional Information

### ***How did you hear about this opportunity?***

- Academic Dean       Direct Mailing       Professional Organization  
 Word of Mouth       Email       Website  
 Training Program  
Director       Other (Specify)

### ***Are you a member of the National Medical Association?***

### ***Have you ever received an award under this announcement?***

- Yes, in the year      No

