

**REQUEST FOR ACCEPTANCE INTO THE NON-CLINICIAN
INTRAMURAL PROGRAM**

DATE:

APPLICANT NAME/DEGREE(S):

PLACE OF BIRTH:

FACILITY:

CURRENT VA APPOINTMENT:

Is the applicant a clinician? Yes No
Salary Source: Patient Care
Research Service
Other ; please explain:

CURRENT ACADEMIC APPOINTMENT:

ACOS' ASSESSMENT OF APPLICANT'S CONTRIBUTION TO VA: Attached Not Attached

DESCRIPTION OF RESEARCH TO BE PERFORMED Attached Not Attached

▪ **PROPOSAL TITLE:**

CURRICULUM VITAE (including past and present research support): Attached Not Attached

PROOF OF CITIZENSHIP: Attached Not Attached

The applicant will accept a VA-paid appointment of at least 5/8ths time if funded.

The following entities are required to provide their signatures:

ACOS for Research and Development

Chief of Staff

Medical Center Director