**2015 ADDRF Fellowships for Doctoral Research on HIV/AIDS Prevention and Vaccine Trials in West Africa**

**Application form**

# **INSTRUCTIONS**

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| **Read all the instructions carefully and complete all sections.**   1. The application form must be submitted in Microsoft Word. It must be completed in **Times New Roman font, size 11, and should be single-spaced**. Applicants should save their file using the following format: *lastname\_firstname\_addrfhiv2015.doc* 2. **Incomplete applications and applications that do not meet formatting requirements (including page limits) will not be reviewed**. 3. Together with this application form, a complete application package should include:    1. Evidence that the research protocol has undergone ethical review and received approval from an ethical review board or the dissertation committee. **If ethical approval is still pending, provide an official letter from your institution indicating that your protocol has been submitted to a review board and that protocol approval is still pending**    2. Proof of citizenship or permanent residence of an ECOWAS country (passport or other national identification);    3. Proof of affiliation to an institution in the following countries: Benin, Gambia, Guinea-Bissau, Nigeria and Senegal    4. Two letters of reference (one of which must come from the primary supervisor of your thesis) 4. Applicants must ensure that scanned copies of any documents are legible 5. All application materials must be received by **11:59 pm (Nairobi Time) on** **August 31, 2015** for the application to be considered. 6. **This application form and supporting documents must be submitted in a single email to** [2015addrf@aphrc.org](mailto:2015addrf@aphrc.org) 7. **Your referees should email reference letters directly to the ADDRF Manager at [2015addrf@aphrc.org](mailto:2015addrf@aphrc.org).**   Reference letters should be addressed to:  The ADDRF Manager  African Population and Health Research Center  APHRC Campus, Manga Close off Kirawa Road  PO Box 10787 – 00100, Nairobi, Kenya  Tel: +254 20 400 1000 / +254 20 266 2244 /+254 20 266 2255  Mobile : +254 722 205-933 / 720 098-388 / 733 410-102  Fax : +254 20 400 1101  E-mail: [2015addrf@aphrc.org](mailto:2015addrf@aphrc.org)  **The name of the applicant should be included in the email subject line** |

# **PERSONAL DETAILS**

|  |  |
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| **Name of applicant:** |  |
| **Address:** |  |
| **Telephone number:** |  |
| **Mobile number:** |  |
| **Email address:** |  |
| **Date of Birth (MM/DD/YYYY):** |  |
| **Nationality:** |  |
| **Sex:** | Male  Female |

# **DETAILS OF DOCTORAL STUDIES**

|  |  |
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| **University and faculty** |  |
| **Title of thesis/dissertation** |  |
| **Full time/Part time study** |  |
| **Name of supervisors and department or agency affiliation** |  |
| **When will/did the research begin?** |  |
| **When do you expect to graduate? (MM/YYYY)** |  |
| **Has your primary supervisor reviewed this application?** | Yes  No  (Click on the relevant box to insert an “x”) |

# **OUTLINE OF PROPOSED RESEARCH**

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| 1. **Specific Aims.** List the research questions/objectives and any hypotheses. Provide a concise description of what the research described in your application intends to accomplish **(Maximum 1 page).** |
| Click here to enter text. |
| 1. **Background and Significance.** Present the background to the proposed research and include a critical evaluation of existing knowledge. Explain how this research advances existing knowledge. All applications must describe the relevance of their research project to HIV/AIDS prevention efforts. **(Maximum 3 pages).** |
| Click here to enter text. |
| 1. **Research Design and Methods.** Describe the project design and the procedures to be used to accomplish the specific aims of the project. Both qualitative and quantitative studies will be considered. Details on sampling procedures should be included. **(Maximum 6 pages).** |
| Click here to enter text. |
| 1. **References.** Provide a list of all references cited in sections 1-3 above (The reference list is not included in the page limits AND should not include any references not cited in the relevant sections) |
| Click here to enter text. |

# **BUDGET**

Complete the attached Microsoft Excel budget form. **The budget should not exceed $10 000.** This amount will include a completion award of $ 1,000; allowances for a laptop computer and analytical software (e.g. STATA, SPSS, Nudist, Atlas/ti) (US$ 1,500); research/data collection (US$ 5,500); and participation in one regional or international conference or workshop (US$ 2,000).

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| 1. **Other sources of support:** Indicate whether you have requested / received other sources of support for this project or if you plan to apply for other funding sources in the future |
| Yes  No  (Click on the relevant box to insert an “x”) |
| 1. **Available Funds:** Please indicate the total amount of additional money (or in-kind support) which may contribute to the planned project (excluding current application). **Note:** Applicants should indicate whether any part of their research is covered by other grants and should provide information on the funding source and what is covered (including amounts) under other funding sources. |
| |  |  | | --- | --- | | **Other Funding** | | | **Estimated cost in USD** | **Source of Funding** | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |
| 1. **Budget Justification** (Maximum 1 page ) |
| Click here to enter text. |

# **TIMELINE TO COMPLETION.**

Complete the attached Microsoft Excel sheet detailed your plans for completing the dissertation. The period should not be longer than 24 months after the award. The timeline should clearly show how far along the research has come and what portions of it remain to be completed.

# **STATEMENT OF RESEARCH INTERESTS**

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| **Provide a statement of future research interests and career plans** (maximum 1 page)  **Note:** Preference is given to younger applicants; therefore, applicants older than 45 years of age should also provide justification in this section why they should be considered for the fellowship |
| Click here to enter text. |

# **APPLICANT’S CURRICULUM VITAE (Maximum 2 pages)**

**EDUCATION *(****Delete unused rows)*

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| **Degree** | **Field** | **Institution** | **Year of Graduation** |
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**Employment (up to 5 most recent positions) *(****Delete unused rows)*

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| **Position** | **Key responsibilities** | **Institution** | **Dates of employment** |
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| **Peer-reviewed publications** |  |
| **Reports, book chapters, and other publications** |  |
| **Conference Presentations** |  |
| **Professional memberships** |  |
| **Awards, honors, and grants received** |  |

# **MAIN SUPERVISOR’S CURRICULUM VITAE (Maximum 2 pages)**

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| **CONTACT INFORMATION** | |
| **Name** |  |
| **Address** |  |
| **Telephone** |  |
| **Mobile** |  |
| **Email** |  |

**EDUCATION *(****Delete unused rows)*

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| --- | --- | --- | --- |
| **Degree** | **Field** | **Institution** | **Year of Graduation** |
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**Employment (up to 5 most recent positions) *(****Delete unused rows)*

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| **Position** | **Key responsibilities** | **Institution** | **Dates of employment** |
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| **Academic Advising or supervision experience**  List in chronological order (beginning with most recent) students supervised including degree and status (including year of graduation for students who have completed their studies) |  |
| **RECENT PUBLICATIONS** |  |
| **PRESENTATIONS** |  |
| **PROFESSIONAL MEMBERSHIPS** |  |
| **AWARDS, HONORS, AND GRANTS RECEIVED** |  |

# **CHECKLIST**

**Please include copies of the following documents**

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|  | Evidence that the research protocol has undergone ethical review and received approval from an ethical review board or the dissertation committee; |
|  | Proof of citizenship or permanent residence in an ECOWAS country (passport or other national identification); |
|  | Two letters of reference, one of which must come from the primary supervisor of the applicant’s thesis and should document how the candidate’s proposed research fits into ongoing research programs in the department.  Referees should send the reference letters via email to [2015addrf@aphrc.org](mailto:2015addrf@aphrc.org) |
|  | |  |  | | --- | --- | | Referee 1 |  | | Name |  | | Title |  | | Affiliation |  | | Address |  | | Telephone |  | | Email |  | |  |  | | Referee 2 |  | | Name |  | | Title |  | | Affiliation |  | | Address |  | | Telephone |  | | Email |  | |