# American-Italian Cancer Foundation's (AICF) International, Post-Doctoral Research Fellowship Program

# **APPLICATION GUIDELINES**

**Deadline to Apply:** February 28, 2017 at 11:59 PM EST. **Notification:** All AICF Fellowship applicants will be notified of a decision on or before July 1, 2017.

- Eligibility for AICF fellowships is limited to Italian citizens applying for fellowships in the United States, and to US citizens applying for fellowships in Italy. Applicants cannot have resided in the Country where their fellowship will take place for more than a year from the due date of the application. The start of residency is defined by the date of the contract of applicant with his/her current institution. In the absence of a contract, if the applicant is already residing in the Country the fellowship will take place, please contact us for more detailed instruction regarding your eligibility at fellowship@americanitaliancancer.org.
- Applicants to AICF's International Post-Doctoral Research Fellowship Program must have received an advanced degree—a PhD, MD, DSc or DVM—no more than three years prior to the due date of the application. AICF's emphasis, however, is on funding post-doctoral researchers who will be completing their first full post-doctoral year of research during the AICF Fellowship period.
- Eligible applications for an AICF Fellowship include proposals for basic or translational cancer research, as well as clinical research.

Fellowships are awarded for a two-year period. To be approved for a second year of funding, fellows need to submit the following by March 31<sup>st</sup>, 2018:

- 1. A detailed interim research report detailing progress to-date
- 2. A request for renewal from the institution associated with the fellowship
- 3. A letter from the mentor detailing the Fellow's progress.

This documentation is reviewed by AICF's Scientific Advisory Board. Renewal of the fellowship for the second year is contingent upon evaluation of the project's process.

**Review Criteria for Applicants:** Applications are reviewed by the Scientific Advisory Board to ascertain eligibility; incomplete applications will be rejected. It is the responsibility of the applicant to ensure that all requirements are fulfilled and all letters of recommendation received by AICF by the stated deadlines.

Fellowship applications are evaluated for:

- Scientific merit and cancer relevance of the proposed research
- Credentials of the candidate
- Qualifications and experience of mentor
- Qualifications of the proposed training institution and of the research environment available to the candidate during the fellowship period
- Letters of recommendation

**Fellowship Stipends and Expenditure Reports:** Fellowship stipends of \$40,000 for the 2017-18 period are meant to cover most living expenses of the awarded candidate. The stipend excludes indirect costs that may be required by the host institution. Specifically, no fringe benefits can be charged to the fellowship award. The stipend is paid to the host institution in the form of a restricted grant to the host institution to specifically reimburse the Fellow for living expenses during the award. AICF requires an expenditure report at the end of each year of the grant period.

Fellowships are paid in installments throughout the award term, which typically begins on August 1<sup>st</sup> and concludes on July 31<sup>st</sup>, with the following schedule:

In U.S.	August		November	February		May	July <sup>1</sup>
In Italy		October			April		July <sup>1</sup>

**Publications:** A PDF copy of all publications must be sent to AICF by e-mail. Applications for renewal, as well as final reports, must include a list of publications. All publications (including abstracts of presentations at scientific meetings) must carry the following acknowledgment:

"Supported by an American-Italian Cancer Foundation Post-Doctoral Research Fellowship, year..."

**AICF Recognition:** Host institutions are required to acknowledge their "American-Italian Cancer Foundation Fellow(s)" on their websites and in all printed materials related to the award.

## **Special Circumstances**

- 1. **Early Termination of Research Project.** Should the Fellow and/or the sponsor consider discontinuing the project or leaving the designated institution, AICF's Executive Director must be notified immediately. Failure to comply with these requirements will jeopardize the possibility for future AICF support to the host institution. At the discretion of the Executive Director, the stipend may be retracted (all monies that had been received by the host institution up to that date must then be returned to AICF) or pro-rated, based upon the number of months completed and work performed during this period. When pro-rating is approved, the Fellow will be required to submit a report on his or her work during the months completed.
- 2. **Transfers.** If a transfer is requested, letters from the AICF Fellow requesting the transfer and the current and new mentors/host institutions should be submitted to AICF at least two months before the transfer is to take place. The transfer request will be considered by the Executive Director and must include: a letter from the current mentor stating the reason for and approval of the transfer; a letter from the new mentor/institution agreeing to supervise the fellow's project and describing the research environment.
- **3.** Late Start of Fellowship Term. Generally, fellowship terms begin on August 1<sup>st</sup>. In certain cases, AICF Fellows will be granted special permission by the Executive Director

<sup>&</sup>lt;sup>1</sup> The July installment at the end of the second year is paid upon receipt of the fellow's final research report and the institution's financial report (due by July 31<sup>st</sup>).

to begin their fellowship term at a later date, thereby extending the fellowship term by an appropriate number of months to encompass a one-year period.

### **Definition of Terms**

**Mentor:** The senior researcher, clinician, or physician who agrees to act as the supervisor for the candidate's proposed project. The mentor is the primary representative of the host institution and is required to provide a description of the research environment and an overview of the relevance and importance of the proposed research project. It is the obligation of the mentor to direct the fellow's scientific development by providing guidance and training for the duration of the fellowship. The mentor agrees to act as AICF's contact person, unless another contact is named. After the first year of funding, the mentor must submit an endorsement letter describing the Fellow's progress to-date.

**Host Institution:** The cancer center, laboratory, or other administrative entity that employs the mentor; where the fellowship candidate's work is to be performed. Host institutions are not reimbursed for administrative costs or laboratory fees in conjunction with the fellow's work. Fellowship monies are paid to the host institution in the form of a restricted grant, and AICF Fellows are reimbursed for their living expenses, as needed; host institution representatives prepare a report on expenditures for AICF at the end of the grant period. The host institution is responsible for securing the appropriate immigration forms.

**Sponsor:** The senior professor, administrator or researcher in the institution where the fellowship candidate currently works/from which the candidate recently graduated. The mentor and the sponsor may be the same person, in cases where the sponsoring institution and host institution are the same; in this case, only one letter of recommendation from the sponsor/mentor is required. When the sponsoring institution and host institution are different, two letters of recommendation are required.

**Letters of Recommendation:** Letters sent directly to AICF from individuals recognized in the field of inquiry the candidate has proposed, and who are in a position to evaluate the candidate's qualifications and the relevance/importance of the proposed research project.

## FELLOWSHIP APPLICATION INSTRUCTIONS

The completed fellowship application must be e-mailed by 11:59 PM EST on February 28, 2017 to fellowship@americanitaliancancer.org. All application documents must be submitted as ONE (1) PDF file, named in the following format: Last Name, First Name. Documents should be ordered in the same way as the list below. <u>Applications not submitted in this format will not be accepted.</u>

A hard copy of the completed fellowship application should be mailed as well and must be postmarked on or before the application due date. Please send to:

Cristina Aibino Executive Director American-Italian Cancer Foundation 112 East 71st Street, Suite 2B New York, NY 10021 USA

## The application should consist of the following:

- 1. Completed application form
- 2. Curriculum vitae and candidate's bibliography (one-page version as well as extended version)
- 3. A letter from the candidate describing how the proposed research and training relates to his or her future career aspirations (one-page maximum)
- 4. Supplemental information for candidates who are already living in the Country of their proposed fellowship, including a copy of their dated contract with the host institution
- 5. The last page of the application, to be completed by the host institution
- 6. The mentor's biosketch
- 7. The research proposal (a 150-word maximum version and an extended version not to exceed two pages) that includes:
  - a. Summary of the proposed research project, including specific aims and methodology
  - b. Statement outlining the potential significance of the proposed research project
  - c. The extended version may include references and a bibliography that will not count towards the 2-page limit.
- 8. Copy of academic transcript(s), both undergraduate and graduate, including the highest degree granted. Transcripts in Italian are accepted.

For items 2, 3 and 7, please use the following formatting guidelines: Times New Roman font, size 12 1 inch margins

In addition, the following supplementary information is required to be mailed directly to Executive Director Cristina Aibino with original signature. A copy of each letter should be emailed to <u>fellowship@americanitaliancancer.org</u> as well. Letters of recommendation must be postmarked on or before the application due date.

- 1. One letter of recommendation from the sponsor/mentor (when they are the same person) or two separate letters of recommendation from the sponsor and mentor (when they are two different people) on institutional letterhead.
- 2. Two additional letters of recommendation on institutional or business letterhead

#### Please address all letters of recommendation to:

Cristina Aibino Executive Director American-Italian Cancer Foundation 112 East 71<sup>st</sup> Street, Suite 2B New York, NY 10021 USA

#### THE COMPLETED FELLOWSHIP APPLICATION MUST BE RECEIVED NO LATER THAN FEBRUARY 28, 2017 at 11:59 PM EST. NO APPLICATIONS WILL BE ACCEPTED AFTER THIS DATE.

# **2017-18 AICF Fellowship Application**

Please complete the following application with all supplementary materials and return by email in <u>ONE (1) PDF</u> <u>file named in the "Last Name, First Name" format to fellowship@americanitaliancancer.org by 11:59 PM</u> <u>EST on February 28, 2017</u>

A hard copy of this completed application with all supplementary materials must be mailed as well. The hard copy must be postmarked on or before February 28, 2017. Please send to:

Cristina Aibino, Executive Director American-Italian Cancer Foundation 112 East 71<sup>st</sup> Street, Suite 2B New York, NY 10021 USA

**<u>TYPE</u>** (CHECK ONE)

\_\_\_\_\_ Fellowship in the United States

\_\_\_\_ Fellowship in Italy

|--|

Name:		
Date of Birth (MM/DD/YYYY):	Place of Birth:	
Citizenship:	Social Security or ID #:	
Telephone Number:	Fax Number:	
Email Address:		
Permanent Home Address:		
Current Mailing Address (if different fr	om above):	
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How did you hear about this fellowship	opportunity?:	

If you are applying for a fellowship in the United States and are currently living there, how long have you lived the United States from the date of the contract with your current host institution?

YEAR(S) MONTH(S)

If you are applying for a fellowship in Italy and are currently living there, how long have you lived in Italy from the date of the contract with your current host institution?

YEAR(S) MONTH(S)

<b>EDUCATION</b>		
<u>Institution</u>	<b>Degree/Field</b>	<u>Degree Month/Year</u>
PROJECT TITLE:		

### **Research Proposal**

Please submit two versions of your proposal: a short version of 150 words or less and an extended version not to exceed two pages. The proposal should include:

- a. Summary of the proposed research project, including specific aims and methodology
- b. Statement outlining the potential significance of the proposed research project

## SUPPLEMENTARY INFORMATION

- Curriculum vitae, including research and professional experience. List in chronological order positions held, professional experience, and citations of publications (in chronological order and with full bibliographic information, including titles, pages, publisher, etc.). Include a one-page version and an extended version
- The mentor's biosketch

- A letter from the candidate describing how the proposed research and training relates to his or her future career aspirations (one page maximum)
- Applicants who are already living in the Country of their proposed fellowship stay must also provide the following information:
  - How is your position being funded at the present time?
  - What are your plans if you do not receive the AICF fellowship?
  - A copy of the dated contract with the host institution

## LETTERS OF RECOMMENDATION

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Mailed directly to Executive Director Cristina Aibino with original signature. A copy of each letter should be emailed to <u>fellowship@americanitaliancancer.org</u> as well.

- 3. One letter of recommendation from the sponsor/mentor (when they are the same person) or two separate letters of recommendation from the sponsor and mentor (when they are two different people) on institutional letterhead.
- 4. Two additional letters of recommendation on institutional or business letterhead

HOST INSTITUTION					
Name of Mentor		Title			
Host Institution					
Street Address					
City	State	Zip	Country		
Telephone		Fax			
Email Address					

## **SPONSORING INSTITUTION**

Name of Sponsor			Title		
Sponsoring Institution					
Street Address					
City	State	Zip	Country		
Telephone		Fax			
Email Address					
Candidate's Signature					

### TO BE COMPLETED BY MENTOR AND HOST INSTITUTION:

Candidate's Name:	
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#### Name of Administrative Officer at Host Institution

Signature

Name of Mentor

Signature

Please attach a statement of acceptance on business letterhead, including:

- (1) A brief summary of the research environment;
- (2) Advanced training opportunities for the candidate;
- (3) Description of funding opportunities available to the candidate at the institution;
- (4) Ways candidate will be recognized as the "American-Italian Cancer Foundation Fellow" by the host institution during the fellowship period; and
- (5) Affirmation that the candidate will be able to attend at least one international meeting (please list the meeting(s) candidate may expect to attend).

#### Statement of acceptance should not exceed 500 words.

#### Please mail directly to:

Cristina Aibino, Executive Director American-Italian Cancer Foundation 112 East 71<sup>st</sup> Street, Suite 2B New York, NY 10021 USA Date

Date