

Application for Postgraduate Research training Grant

Important Information

Applications should be sent by email to NNI@nestle.com **by January 31 or August 31.**

Application will be reviewed and applicants informed of the outcome by end of April/November.

Please plan to start your program not sooner than 3 months after the application deadline to give time for approval process and administrative arrangements with a host institution.

Submit only one application and for a single programme. If you have more than one project, decide which is your best option and submit that one.

Applications without all documentation, **including a letter of acceptance by the faculty at the hosting institution** will not be considered.

Before any money can be allocated to the research training fellowship, you will need to produce proof of health insurance for the country you will be visiting for the whole duration of your stay. If you can purchase such insurance through the hosting Institution, please provide a letter from the faculty accepting you stating so.

The NNI fellowship program is to cover the applicant's travel and living expenses and a small amount for any administrative fees that the hosting Institution may charge. It does not cover budgetary expenses to carry out the research proposal (purchase of equipment, materials, etc.). Please note that the money will be given to the Host Institution which will disburse it to the fellow. In no case will any money be given directly from the NNI to the fellow.

Title:	Sex: (M/F)	Date of Birth: (dd/mm/yyyy)	Nationality:
Surname/Family Name:		First Names(s):	
Full name of Institution: (all applicants must have permanent employment)			
Full postal address of Institution to be used for professional correspondence:			
Telephone: (country code, city, number) Work: Home: Mobile:		Your Email:	
Fax: (country code, city code, number)		Institution where you currently work (Email or Website):	
Type of training: 1. Clinical Research 2. Basic Research 3. Analysis of data 4. Learning specific laboratory skills 5. Other (please specify): _____ _____			
Duration of the training:		Proposed start date:	
Training discipline:		Study disease/condition:	

Project Title: (120 characters maximum)
Proposed university(s)/site of training: (attach letter of approval from receiving site)
1. Educational qualifications: (degree, university, year, begin list with highest qualification)
2. Publications, abstracts and presentations: (list 5 most important)
4. Detailed description of current post/position: (title, institution, date, since you have been in this position main responsibilities)
5. List of previous jobs: (title, institution, dates, responsibilities)
6. Current research interest and career development plan: (clearly indicate how the proposed training will contribute to your future career goals)
<p>7. An outline (2 pages maximum) of the proposed thesis project including:</p> <ul style="list-style-type: none"> • Rationale, • Objectives and • Methodology, citing a minimum of 5 references. <p>The outline should also include</p> <ul style="list-style-type: none"> • How the project will contribute to the advancement of knowledge, • The scientific merit and relevance of the project, • Innovative aspects of the research, • Capacity building aspects of the study. Nutrition sustainability aspects of the study.
8. Applicants from countries requiring national endorsement should submit their application through proper government channels.
<p>Signature: _____ Date: _____</p>