



## Food Safety and Inspection Service Research Participation Program

Application Date:

Applicant Type:

If other, please specify:

Position Posting Number:

**1. Name:**

*First Name*

*Middle Name*

*Last Name*

*Suffix*

**2. Citizenship Status:**

If Non-U.S. citizen, country of citizenship:

**3. Age Verification:**

**4. Current Address and Contact Information:**

Address:

City:

State:

Region/Province:

Zip:

Country:

Phone:

Cell Phone:

E-mail:

**5. Current Academic Status**

*Answer either question a or b below.*

**a. If you are *currently* a student:**

Degree Expected:

Expected Graduation Date:

Academic Field:

Institution Awarding Degree:

**b. If you are *not currently* a student:**

Highest Degree Held:

Graduation Date:

Academic Field:

Institution Awarding Degree:

Applicant:

For Posting Number:

**6. Describe your research interest and educational and professional goals. *Maximum of one page.***

Applicant:

For Posting Number:

**7. List your research experience that is relevant to the posting to which you are applying. *Maximum of one page.***

Applicant:

For Posting Number:

- 8. List your professional skills and abilities that are relevant to the posting to which you are applying. Include knowledge/skills related to specialized laboratory equipment, computer hardware, computer software, or computer languages. *Maximum of one page.***

Applicant:

For Posting Number:

**9. References:**

References must be three professional or scientific individuals familiar with your qualifications. These individuals must be able to speak to your educational, professional and research experience.

Name:

Phone:

Cell Phone:

E-mail:

Name:

Phone:

Cell Phone:

E-mail:

Name:

Phone:

Cell Phone:

E-mail:

Applicant:

The U.S. Department of Agriculture (USDA) Food Safety and Inspection Service (FSIS) is committed to broadening the participation of groups currently underrepresented in science and engineering in USDA FSIS activities. In order to accurately gauge our progress in achieving this important goal, we ask that applicants provide the requested demographic information about themselves. Submission of the requested information is voluntary and is not a precondition of award. Nonetheless, we need your cooperation, for information not submitted will seriously undermine the statistical validity, and therefore the usefulness, of information we get from others.

**Ethnicity:**

- Hispanic (of Mexican, Puerto Rican, Cuban, Central/South American, or other Spanish culture of origin descent, regardless of race)
- Not Hispanic, Latino or Spanish origin
- Decline to answer

**Race: (Check all that apply.)**

- White (Having origins in any one of the original peoples of Europe, North Africa, or the Middle East)
- Black, African American, or Negro (Having origins in any Black racial groups of Africa)
- American Indian or Alaska Native (Having origins in any of the original people of North America, and maintaining cultural identification through tribal affiliation or community recognition)
- Asian (Having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, India, China, Japan, and Korea)
- Native Hawaiian or Other Pacific Islander (Having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands)
- Other race:
- Decline to answer

**Gender:**

**How did you learn about this program? (Check all that apply.)**

- Faculty Member
- Friend, classmate, other student, family member
- FSIS Scientist
- FSIS website or brochure
- Internet search
- Conference/Presentation
- Email announcement
- Other:

Applicant:

For Posting Number:

**Certification of Accuracy of Information Provided**

I am aware that this program is supported by funding from the United States Government and, therefore is subject to Federal law regarding false statements and fraud, particularly the criminal provisions of 18 U.S. Code Section 1001. I certify, under penalty of law, that the submitted application contains no false or fraudulent representations, statements, or entries.

I understand that information in the application and supporting materials will be provided to the selected reviewers and staff from U.S. Department of Agriculture (USDA) Food Safety and Inspection Service (FSIS) and ORISE involved in the selection process. I further understand that it is my responsibility to redact all personally identifiable information (PII) such as Social Security Number, date of birth and Student ID from documents submitted with this application.

By signing below, I certify that, to the best of my knowledge, all information contained in this application is accurate. I understand that any falsification will render me ineligible for participation and, if found after participation has begun, may require me to reimburse any funds received.

**Signature:**

**Date:**

**Submit completed application by email to: [SciEdPrograms@oraus.org](mailto:SciEdPrograms@oraus.org)**

If your computer does not support the electronic signature feature, complete the application and save an electronic copy on your computer. Print the signature page and sign and date it. Scan the signature page into an electronic document saved on your computer. In one e-mail, send the application file and signature page file as e-mail attachments. Send to the e-mail address above.