

ELIGIBILITY STATEMENT
NEUROFIBROMATOSIS RESEARCH PROGRAM
Fiscal Year 2018 Early Investigator Research Award

CDMRP Log Number: NF18_____

Principal Investigator's (PI's) Name: _____

Title of Application: _____

The **investigator** will have met **ALL** of the following eligibility criteria:

- (1) Be involved in a postdoctoral training or medical residency program (place check mark in box):

Yes

- (2) Possess at least 1 and up to 4 years of continuous postdoctoral research experience by June 1, 2018

Date the PI began postdoctoral research in the proposed setting: _____

(Month/Year)

- (3) Possess a doctoral degree (i.e., Ph.D., M.D./Ph.D., D.O./Ph.D.) or a clinical doctoral degree (i.e., M.D./D.O. or Ph.D. in a clinical discipline) from an accredited organization or program

Date the PI completed/will complete requirements for degree: _____

(Month/Year)

Signature of PI: _____ Date: _____

By signature below, I certify that to the best of my knowledge the PI fulfills the requirements to be considered for this award and specifically meets the eligibility criteria described above.

Name of Official (please print): _____

Title of Official: _____

Organization: _____

Signature of Official: _____ Date: _____