

2024 ASTRO Medical Student Fellowship Award Application

The application must include all of the following information. Incomplete applications will not be scored. Applications will be scored by members of ASTRO's Health Equity, Diversity and Inclusion (HEDI) Council Workforce Diversity Committee.

Title Page

- Project Title
- Research Type (select Basic Science or Clinical)
- Anticipated Project Start Date, Anticipated Project End Date

Applicant Data

- Name
- Medical School
- Medical School Year (select: MS1, MS2, MS3, MS4, or Other; if Other, then explain.)
- Please answer yes or no to the following questions as they relate to your medical school:
 - a. Does the main hospital(s) associated with your medical school have an affiliated radiation oncology department(s)?
 - b. Does the main hospital(s) associated with your medical school have an affiliated ACGME radiation oncology residency program?
 - c. Does the main hospital(s) associated with your medical school have an affiliated NCI-designated comprehensive cancer center?
- Other Degree(s)
- Phone Number
- Date of Birth
- Mailing Address
- School email address
- Personal email address

Institution and Contacts

- Identify the place of research where you will conduct your project.
- List the department chair's name and email address.
- List the mentor's name and email address.

Applicant Demographics

- Gender:
 - Female
 - Male
 - Non-binary/third gender
 - Prefer not to say
 - Other / Prefer to self-describe – please indicate
- Are you of Hispanic, Latino, or Spanish origin?
 - No
 - Yes: Mexican, Mexican American, Chicano
 - Yes: Puerto Rican
 - Yes: Cuban
 - Yes: Other (for example, Argentinian, Colombian, Dominican, etc.) – please indicate
- What is your race? (You will be able to select up to two.)
 - White
 - Black or African-American
 - American Indian or Alaska Native (please indicate name of enrolled or principal tribe)
 - Asian
 - Indian
 - Chinese
 - Japanese
 - Korean
 - Vietnamese
 - Filipino
 - Other Asian (for example, Laotian, Thai, Pakistani, Cambodian, etc.) – please indicate

- Native Hawaiian
- Guamanian or Chamorro
- Samoan
- Other Pacific Islander (for example, Fijan, Tongan, etc.) – please indicate
- Country of Citizenship
- Are you from a Disadvantaged Background? If yes, you will need to certify your disadvantaged background status by submitting at least one of the following documents at the time of application (please note that current financial need is not sufficient to be classified as an individual from a disadvantaged background). Select the type of financial status document that applies to you:
 - A written statement from the applicant’s medical school indicating qualification for Federal disadvantaged assistance during matriculation.
 - Documentation of Health Professions Student Loans (HPSL) or Loans for Disadvantaged Students.
 - Documentation of a scholarship from the U.S. Department of Health and Human Services (DHHS) under the Scholarship for Individuals with Exceptional Financial Need.

Application Documents

1. **Statement of Interest:** Address your interest in the field of radiation oncology and the ASTRO Medical Student Fellowship program. Limited to 500 words.
2. **Structured Research Abstract:** Limited to 750 words. Must contain the following sections:
 - Background and Significance
 - Specific Aim
 - Preliminary Data
 - Research Design and Methods
 - Conclusion
 - Research Assurances: Submit IRB approval or statement off pending approval
3. **Mentorship Plan** (written together by the mentor and applicant): Provide a maximum of one page describing a detailed clinical exposure and research plan for the fellow to include:
 - Clinical exposure, averaging at least once weekly.
 - Research timeline and specific tasks to be completed by fellow.
 - Plan for regularly scheduled meetings with the mentor and fellow.
 - Delineation of available resources and environment:
 - Facilities to be used at the institution where the research will be undertaken.
 - Any specific equipment you might need to complete the project.
 - Any other additional information the committee might need to know to ensure the project can be completed successfully.
 - Other education: Describe any other educational opportunities, lectures, didactics within the department, cancer center and/or institution available to the medical student.
4. **Letters of Commitment:**
 - a. Mentor(s)
 - b. Department Chair
5. **Applicant Photo**
6. **CV:** Attach your complete curriculum vitae (including all past and current funding from any source). Limited to two pages.
7. **Mentor Biosketch (NIH Style)**
8. **Mentor Training and Publication List** (list or description of the mentor’s prior trainees, detailing trainees’ names, dates of mentored training, type of research and current positions. Mentors could also include any publications submitted by trainees as a result of their work with the mentor.)

Submission Deadline: February 15, 2024
Apply Online: <https://proposalcentral.altum.com>

Questions? Email: diversity@astro.org