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**RESIDENT APPLICATION**

**NEDS PRECEPTORSHIP PROGRAM**

Resident Applicant Name:

Residency Program: PGY:

Address:

Email:

Phone number:

NEDS Preceptor name:

Affiliation:

Address:

Email:

Phone:

**Project Proposal**

**Part 1:** (*include background, aims/hypothesis, methods, timeline and references);*

*note: proposal length is limited to 2 pages (not including references):*

*[insert proposal copy here]*

***Part 2****:* ***[Covid-19 component]*** *Please consider and explain how your project could be conducted should COVID-19 related restrictions require a virtual project format only.*

**Project Budget Proposal** (Funding will cover travel, lodging, and/or meals):

*[insert budget details here]*

**Please attach (A) a Letter of Support from your NEDS Preceptor; (B) a Letter of Approval from your residency program; and (C) your CV along with this application by Jan 1, 2021.**