



**Fellow Application Form**

Name: \_\_\_\_\_ Dept: \_\_\_\_\_  
 Title: \_\_\_\_\_ College: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Lab Website: \_\_\_\_\_ Office Location: \_\_\_\_\_

**Research Interests**  
 2-3 sentences

**Short-Term Research Goals**  
 300 words

Name: \_\_\_\_\_

Dept: \_\_\_\_\_

## Long-Term

### Research Goals

300 words

Name: \_\_\_\_\_

Dept: \_\_\_\_\_

**Fit with the**

**HEALTH  
Research  
Institute**

500 words

Name: \_\_\_\_\_

Dept: \_\_\_\_\_

## Attachments

Please attach the items on this checklist.

Current Curriculum Vitae/CV

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### Submission Instruction:

Save the completed form and attach it to an email.

#### Email to:

[hri@central.uh.edu](mailto:hri@central.uh.edu) Subject Line: Fellow Application Form\_Last Name

HRI will not process incomplete forms. Please fill out all fields and attach Current Curriculum Vitae/CV.

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