

**TWO YEAR MERETI PROGRAM IN RESEARCH & RESEARCH ETHICS**  
**APPLICATION FORM**

Please PRINT clearly or TYPE.

**PART I: PERSONAL INFORMATION**

**Name (AS IT APPEARS ON YOUR PASSPORT)**

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**Family/Surname                                First                                Middle**

**Title:**

**Home Address:**

**Telephone Numbers:**

**Home:     Country code:                    City code:                    Number:**

**Mobile:    Country code:                    City code:                    Number:**

**E-mail:**

**Gender:**     Male     Female    **Date of Birth:**       /       /        
Month     Day             Year

**Place of Birth: (city/country)**       **Citizenship:**   

**PART II: PROFESSIONAL INFORMATION**

**Job Title:**

**Position:**

**Institution Name:**

**Institution Address:**

**Telephone:    Country code:                    City code:                    Number:**

**E-mail :**

**PART III: EDUCATIONAL BACKGROUND**

Please list in chronological order all educational experiences leading to an academic degree.

<b>College/University</b>	<b>City, Country</b>	<b>Dates Attended</b> <small>(Mo./Yr. To Mo./Yr.)</small>	<b>Discipline</b>	<b>Degree</b>	<b>Date Degree Earned</b> <small>(Month/Year)</small>

**PART IV: DESCRIPTION OF PRESENT WORK AND RESEARCH EXPERIENCES**

Present POSITION/ DUTIES/ FUNCTIONS:

Describe your own EXPERIENCE IN HEALTH RESEARCH.

**PART V: EXPERIENCE AND INTEREST IN ETHICS/RESEARCH ETHICS**

Describe your own experience IN THE ETHICAL REVIEW OF RESEARCH (e.g., participation in a research ethics committee at your institution).

Describe your experience in the LEARNING OF ETHICS, for example, courses taken, workshops attended, etc. If none, state NONE.

Describe your own experience in the TEACHING OF ETHICS. If none, state NONE.

**Part VI: FUTURE ACTIVITIES IN RESEARCH ETHICS**

Please describe how the Certificate Program will help you enhance research ethics in your institution/ country. Please be specific regarding what kind of activities you will do (teaching activities, developing ethics committees, research projects, etc.).

**PART VII: SCHOLARSHIP INFORMATION**

Full scholarships are offered on a highly competitive basis for applicants who are from and reside in low and middle income countries in the Middle East.

If the above condition applies, do you wish to be considered for a scholarship opportunity?

\_\_\_\_\_ YES            \_\_\_\_\_ NO

**PART VIII: DOCUMENTATION OF ENGLISH PROFICIENCY**

Documentation of English Proficiency is necessary for final acceptance (about May 15), but is not necessary for the initial application. Please check which documentation you currently have to demonstrate English proficiency:

\_\_\_\_\_ TOEFL Score

\_\_\_\_\_ IELTS Score

\_\_\_\_\_ English Speaking University in the US/UK/Canada/Australia  
(A degree from the AUC - Cairo or AUB - Lebanon is acceptable)

\_\_\_\_\_ I do not currently have a TOEFL or IELTS score, but will obtain such testing if I obtain provisional acceptance.

**PART IX: ADDITIONAL APPLICATION MATERIALS REQUIRED  
WITH YOUR APPLICATION – PLEASE ATTACH THE FOLLOWING**

1. Curriculum Vitae (CV)
2. One-page personal statement of career goals
3. Two recommendation letters\*
4. Official transcripts from prior academic institutions
5. Documentation of English proficiency

\*Please have TWO individuals who have served in a supervisory role send letters of recommendations to:  
hsilverm@medicine.umaryland.edu

DECLARATION: I declare that this information is completely accurate and without falsifications.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CLOSING DATE FOR APPLICATIONS is January 15, 2018**

Application materials can be submitted by **e-mail to:**

Henry Silverman email: [hsilverm@medicine.umaryland.edu](mailto:hsilverm@medicine.umaryland.edu)