

Application for Continuing Education Program Staff Training in Extramural Programs (STEP)

The program is designed for staff of the NIH extramural programs. See the STEP brochure for module descriptions and specific participation requirements.

SECTION A -- To be completed by the applicant

Name (<i>Please type</i>)	Organization (<i>ICD</i>)	Building	Room No.	Phone No.
Full E-mail Address (<i>optional</i>)			FAX Number	
Position Title	Series		Grade: GS or CO	
Job Responsibilities <input type="checkbox"/> Program <input type="checkbox"/> Contracting <input type="checkbox"/> Review <input type="checkbox"/> Policy <input type="checkbox"/> Grants Management <input type="checkbox"/> Other (<i>specify below</i>)			Give number of years... In Federal service _____ at NIH _____ In NIH extramural _____ In present position _____	

Extramural Experience other than Present Assignment

Module Number	Module Title	Date of Module
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My participation in this module would be beneficial to NIH and to me for the following reasons. Give a short description of present responsibilities, specifically how they relate to the module applied for, and how participation will relate to possible future assignments. Give careful consideration to this section. Selection is based substantially on this description of job relatedness. (*If you are applying for more than one module in the current series, list them in order of interest, and fill out a separate application for each module.*)

Applicant's Signature	Date
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SECTION B -- To be completed by Supervisor

Signature	Supervisor's Name and Title (<i>Please type</i>)	Building, Room, Phone No.
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Forward to: STEP Program Office, Building 31, Room 5B41

SECTION C -- To be completed by STEP Program Office

<input type="checkbox"/> Approved <input type="checkbox"/> Alternate	Signature	Date
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