



## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

## Current Institution

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Department: \_\_\_\_\_

## CV and Personal Statement

Attach your curriculum vita and a short (1 page) statement explaining your research background, interest in astrobiology and career plan.

## Research Plan

Attach a research plan of 5 pages or less, describing the research you intend for the AFD Program Sabbatical, including the alignment of the proposed research to the NASA Astrobiology Roadmap, <http://astrobiology.nasa.gov/roadmap/>. Also include justification for your choice of the laboratory and host.

## Letters of Endorsement

Attach letters of endorsement from a dean/provost at your home institution, indicating support of your participation in the sabbatical program, and one from your proposed host, agreeing to the plan of research.

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit pdf of application and attachments to [Melissa.kirven@nasa.gov](mailto:Melissa.kirven@nasa.gov) or FAX to 650-604-4251.

**Application Deadline: April 16, 2018**