



SPONSOR STATEMENT AND FELLOWSHIP AGREEMENT

As an applicant for the HRS Research Fellowship, Fellows must receive counsel and direction from a senior investigator interested in the conduct and progress of the research project, and each fellow must have a qualified sponsor.

Each sponsor is limited to one application per funding cycle. If more than one applicant lists the same sponsor, all applications with that sponsor will be withdrawn.

SPONSOR STATEMENT:

Complete the sponsor information and provide the requested items listed below.

FELLOWSHIP AGREEMENT:

Review the fellowship agreement and provide a signature and date.



SPONSOR STATEMENT

SPONSOR INFORMATION:

Full Name: _____

Position Title: _____

Department: _____

Institution: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Fax: _____

Email: _____

Are you a current member of the Heart Rhythm Society?

(NOTE: All sponsors MUST be a member of the Heart Rhythm Society at the time of submission.)

☐ Yes ☐ No

Attach:

- ☐ A list of all current and previous (for the past 5 years) research trainees. Include years under your supervision, degree received under your supervision, salary and project support, and current position.
- ☐ A sponsor statement (see instructions below, use Arial 11-point font, maximum 4 pages)
- ☐ A copy of the sponsor and any significant collaborator's biographical sketch (NIH format, use Arial 11-point font)
- ☐ A detailed list of equipment and resources directly available to the applicant for use in the completion of the proposed work.



SPONSOR STATEMENT INSTRUCTIONS:

Specifically address the following 7 items in your statement:

1. The current research in the Sponsor's establishment with which the applicant will be involved and describe the relationship of the applicant's proposed project to other ongoing research in the Sponsor's lab or clinic.
2. The plan to develop the applicant's research capabilities, including a statement as to the sequence in which the applicant will be given increasing personal responsibility for the conduct of research.
3. The other related training or coursework that will be required for specific technical skills or methods the applicant will expect to master. (Include the names, degrees, and titles of other individuals who will be involved in training the applicant.)
4. The relationship of the research training plan to the applicant's career goals.
5. The role that the Fellow played in the development of the research proposal.
6. The Sponsor's assessment of the applicant. Include information about the applicant's prior training, grades or test scores, publication record, and any other relevant information.
7. The scope and source of all funds available for the applicant's research project, including departmental and institutional funds.



FULL-YEAR FELLOWSHIP AGREEMENT:

During my tenure, I shall be designated as a Heart Rhythm Society Research Fellow and shall devote full-time to research and ancillary activities directly related to my training. Under no circumstances will I make major changes in my program or activities without the prior approval of the Heart Rhythm Society.

I will not accept any grants, research funds, or other support that overlap with the time commitment or budget of this award, and I will not accept any fees for private practice or professional services. I understand that supplements to the stipend paid to me by the Heart Rhythm Society may be made by my sponsoring institution so long as the total income is in accord with the institution's policy.

At the termination of my full-year fellowship, I shall submit a full progress report of my accomplishments and activities and a financial expenditure report by June 30th or forfeit the remaining monies.

Results of my research will be made freely available to the public through appropriate scientific channels, and all publications will bear the statement: "This work was performed during the tenure of (name of fellowship scholarship) Fellow of the Heart Rhythm Society". An electronic or paper reprint of any publications based on my work will be furnished to the Heart Rhythm Society as soon as available.

If for any reason, I leave the institution at which I have arranged to work or abandon the work for which my fellowship is granted, I will notify the Heart Rhythm Society in advance and furnish them with a report of my work accomplished to date. In such an event, my fellowship will terminate as of the date I leave or cease to work, and future scheduled payments will be discontinued unless the Heart Rhythm Society and the Chair of the Research Fellowship Subcommittee have granted authorization or continuation elsewhere.

By signing this application, I agree that all information you provide is current and accurate. Should there be any false statements, I understand that the fellowship will be revoked.

FULL-YEAR FELLOWSHIP AGREEMENT (SPONSOR):

The statement above references the fellowship agreement signed by the applicant.

As the individual responsible for the supervision of the work to be performed under this fellowship, I have read the above agreement and agree to the terms thereof. Furthermore, this signature certifies that if this fellowship is awarded, appropriate training, adequate facilities, and supervision will be provided.

Signature of Sponsor: _____ Date: _____