**Stanford Medicine – Rambam Health Care Campus Collaboration**

**Application for Scientific Exchange**

**OVERVIEW**

Stanford Medicine and the Rambam Healthcare Campus of Israel have launched a broad, multi-faceted health sciences Collaboration. The Collaboration provides up to $50,000 for one year (with the option to renew for one year) to fund the exchange of faculty and trainees between the two institutions.

Funding will be available beginning January 2021.

**CRITERIA**

Eligibility:

* Academic and clinical faculty, postdoctoral students, medical students, residents, and other licensed health professionals (including, but not limited to, nurses, advanced practice nurses, physicians, etc.) from both institutions may apply.
* For applicants requesting clinical privileges at either institution, necessary licensing credentials must be obtained prior to release of the money. If not accomplished at the start of the grant, the matter will undergo review by the Steering Committee.

Applications: Grant requests for academic exchange/fellowships should include a description of the project and desired mentor(s) in the application. It is recommended to have a host institution mentor (primary) and a home institution mentor (secondary).

Areas of interest to the Collaboration include, but are not limited to

* Device innovation
* Cancer discovery and care delivery research
* COVID/pandemic and disaster preparedness
* Drug discovery through SPARK collaboration
* Cardiovascular stem cell research
* Big data analytics

**INSTRUCTIONS**

* Applicants need to complete the Information Form (below) and supplemental application materials for approval.
* Applications are accepted on a rolling basis.
* Submit completed applications to both Kelsey Sobomehin (Kelsey.Sobomehin@stanford.edu) and Netta Glebotzki (n\_glebotzki@rambam.health.gov.il).
* Applications will be reviewed by a joint steering committee and will be considered for funding based on collaboration priorities and available funds.
* Applicants must complete all of the steps listed below for an application to be considered complete. Incomplete applications will not be reviewed.

**APPLICATION**

Complete applications will consist of the following elements:

1. Signature and Acknowledgment (page 2)
2. Information Form (pages 3-4)
3. Curriculum Vitae
4. Description of the research that will be done during the exchange, including:
	1. What are the research goals and specific research aims (one page)?
	2. Quarterly benchmarks (300 words).
	3. Experience you hope to gain and what you expect to contribute (500 words)
5. Home department approval: Applicants are required to include a letter of support from their home department head or dean.
6. Host site approval: Applicants are required to include a letter of support from the host site on letterhead, including:
	1. Description of the lab/work environment
	2. Description of the applicant’s responsibilities
7. Proposed budget – Include estimated travel expenses, housing, vaccines, and travel medications. Please note that funding support is not guaranteed to cover the full-proposed budget. Matching funds from other sources, including either the home institution or the destination lab, are strongly encouraged but not required.

**SIGNATURE AND ACKNOWLEDGEMENT**

By signing below, you acknowledge that you understand the criteria and application process for the Stanford Medicine - Rambam Health Care Campus Scientific Exchange.

|  |
| --- |
|  |
| Signature | Date |
|  |  |
| Printed Name |  |

**Stanford Medicine – Rambam Health Care Campus Collaboration**

**Scientific Exchange**

**INFORMATION FORM**

**Personal Information:**

Stanford/Rambam ID Number:

Name:

Address:

Department Affiliation:

Title:

Cell Number: (   )

Pager Number: (   )

Email:

Alternate Email:

**Primary (Host) Mentor:**

* Faculty’s name:
* Lab Manager’s name:
* Lab address:
* Lab website, if applicable:
* Specialty:
* Email:
* Contact Number (include country code):

**Secondary (Home) Mentor:**

* Faculty’s name:
* Lab Manager’s name:
* Lab address:
* Lab website, if applicable:
* Specialty:
* Email:
* Contact Number (include country code):

**Funding Support:**

Please describe other ways (if any) in which you are able to fund this rotation:

Do you have available housing near/at the host institution? [ ]  Yes [ ]  No

**Emergency Contacts:**

Please provide three emergency contacts (name, phone, e-mail and relationship):

1.

2.

3.