

# The American Society for Nutrition, Inc. (ASN)

9650 Rockville Pike, Room 3300, Bethesda, MD 20814-3998

## ASN National Clinical Nutrition Internship Program (CNIP)

### APPLICATION for the Year 2008

Please carefully review the accompanying brochure before completing this application.

**INSTRUCTIONS:** This application consists of Part I, to be completed by the applicant and Part II, to be completed by the applicant's medical school sponsor. The following documents are due at ASN, 9650 Rockville Pike, Bethesda, MD 20814-3998, no later than February 8, 2008:

1. Application form, Part I (includes your personal statement) and Part II (completed by your sponsor)
2. Applicant's curriculum vitae
3. Letter and transcript from your medical school confirming active student status
4. Letter of recommendation from your medical school dean or his/her designee, in a sealed envelope

#### Part I - To be completed by the applicant

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Medical School

\_\_\_\_\_  
Current Year (1<sup>st</sup> year, 2<sup>nd</sup> year etc.)

\_\_\_\_\_  
Expected Graduation Date

Current Address \_\_\_\_\_  
\_\_\_\_\_

Current Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Social Security Number \_\_\_\_\_

Permanent Address (for long-term contact)  
\_\_\_\_\_  
\_\_\_\_\_

Permanent Phone \_\_\_\_\_

Name and Location of Undergraduate \_\_\_\_\_

Major \_\_\_\_\_

Are you in a special medical school program of any kind (i.e., MD, PhD, MS, research)?

\_\_\_\_\_

If you are, please describe your area of research or program \_\_\_\_\_

\_\_\_\_\_

If selected, dates when would you be available to serve this internship? \_\_\_\_\_

Experience in clinical or research in the field of nutrition \_\_\_\_\_

\_\_\_\_\_

Other formal educational experience \_\_\_\_\_

\_\_\_\_\_

PERSONAL STATEMENT (two page maximum), please include

- previous nutrition experience
- current plans for future medical career
- thoughts on how nutrition internship would help meet your professional goals

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

This form should be submitted with Part II of the application form  
no later than February 8, 2008 to:  
ASN, 9650 Rockville Pike, Bethesda, MD 20814-3998  
Attention: Lisa Routzahn

