



## PDS Training Form - Non-Competitive (2022-23)

**Please note:** PDS will not fund any activities (conference, training, or research) that has started or ended before the notification date of the current PDS cycle. Your signatures on this form affirm that you have read this note. See the PDS Handbook for details.

**When you submit your online application, this page should be uploaded into the field, "Advisor signature page" and the proposal (below) uploaded into the field, "Proposal upload."**

### Training Proposal

*Upload your proposal as a separate PDF file. Please address each item explicitly (max 1000 words). You may address each item as separate sub-sections.*

1. Provide a brief description of your overall research project and explain its significance.
2. Describe the specific skill or knowledge you seek to acquire with this training support.
3. Explain why this skill/knowledge is necessary for your overall research project and for your progress towards the PhD.
4. Describe why you cannot use existing Emory resources to acquire this skill or knowledge.
5. Explain how the external sources of funding you have applied to (or plan to apply to) support your project. How will this funding affect/change your PDS application's budget?
6. Provide a timeline of your project and a summary table outlining your budget clearly (convert all foreign expenses to USD).

\*Applications that do not address the above questions explicitly will be automatically denied. The forms below are now fillable, electronically, if desired, using a PDF reader (this includes the signature lines).

**I have consulted the PDS Handbook 2022-23 before submitting this application:** Yes  No

**I have submitted PDS Reports for all previously approved PDS applications:** Yes  No  N/A (first time)

### Good Standing

*I certify that I am not on probation and am in good standing with my program and with the Laney Graduate School.*

**Student Signature:** \_\_\_\_\_

### Public Health Guidelines

*I affirm that I will be fully compliant with Emory University's COVID-19 [policies](#), including following the Community Compact on Emory's webpage that may exist at the time of my travel. I understand that the CDC recommends delaying travel until the traveler is fully vaccinated.*

**Student Signature:** \_\_\_\_\_

### Faculty Advisor and Director of Graduate Studies Approval

*This training activity is necessary for the student to receive their degree and cannot be undertaken without this additional support. I have read this application and believe that the student will accomplish their goal through the proposed training activity. I certify that this proposed training activity and/or travel is essential to the student's academic progress and that I support the training/travel.*

**Faculty Advisor Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**If applicable to your program:\***

**DGS Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

*It is the student's responsibility to retrieve signatures from their DGS and Faculty Advisor. If your DGS or Faculty Advisor are unavailable, please contact your program administrator (PA). \*Check with your PA regarding your program's signature requirement.*