The Health Policy Research Scholars program is open to full-time students who are from underrepresented populations and/or disadvantaged backgrounds whose racial, socio-economic, ability status and personal factors allow them to bring unique and diverse perspectives to their research. Applicants must be entering the second year of their doctoral program (by September 2018) and be from any research-focused discipline. Students must be interested in learning to apply health policy research. Prior experience or knowledge in health policy is not required or expected. Rather, the program is designed for doctoral students from a variety of disciplines (e.g., urban planning, political science, economics, ethnography, education, social work, etc.).

Examples of eligible individuals include, but are not limited to, first-generation college graduates, individuals from lower socioeconomic backgrounds, individuals from racial and ethnic groups underrepresented in doctoral programs, and individuals with disabilities.

1. Please specify how your background is underrepresented in doctoral programs and/or disadvantaged. *

   Select all that apply.

   □ Racial or ethnic background
   □ Educational background
   □ Financial background
   □ Other (please specify)

2. Will you be a second-year full-time doctoral student in September of 2018? *

   □ Yes  □ No

   Applicants must be U.S. citizens, permanent residents, or individuals granted Deferred Action for Childhood Arrivals ("DACA") status by the U.S. Citizenship and Immigration Services at the time of application.

3. Do you fit the eligibility criteria described above? *

   □ Yes  □ No

   A recipient of this award cannot be related by blood or marriage to any Officer** or Trustee of the Robert Wood Johnson Foundation, or be a descendant of the Foundation’s founder.
**The Officers are the Chairman of the Board of Trustees; President and CEO; Chief of Staff; General Counsel; Executive Vice President; Secretary; Assistant Secretary; Treasurer; and Assistant Treasurer of the Foundation.

4. Does either of the above apply to you? *
   ○ Yes ○ No

5. If you specified "Yes" in the question above, please indicate the name(s) of the person/people to whom you are related. Include their role.*
   You may skip this question if you responded "No" to the question above.

Government employees who are not considered government officials* under Section 4946 of the Internal Revenue Code are eligible for this program.

Prior to selection, any applicant who is a government employee will be required to furnish a letter from the applicant’s supervisor confirming that the applicant is not a government official under this definition.

* For these purposes, government officials are defined as any person who holds one of the following:
   1. An elective public office in the executive or legislative branch of the Government of the United States,
   2. An office in the executive or judicial branch of the Government of the United States, appointment to which was made by the President,
   3. A position in the executive, legislative, or judicial branch of the Government of the United States— (A) which is listed in schedule C of rule VI of the Civil Service Rules, or (B) the compensation for which is equal to or greater than the lowest rate of basic pay for the Senior Executive Service under section 5382 of title 5, United States Code,
   4. A position under the House of Representatives or the Senate of the United States held by an individual receiving gross compensation at an annual rate of $15,000 or more,
   5. An elective or appointive public office in the executive, legislative, or judicial branch of the government of a State, tribe, possession of the United States, or political subdivision or other area of any of the foregoing, or of the District of Columbia, held by an individual receiving gross compensation at an annual rate of $20,000 or more, and a significant part of whose activities include "the independent performance of policy-making functions.
   6. A position as personal or executive assistant or secretary to any of the foregoing, or
   7. A member of the Internal Revenue Service Oversight Board.

6. Are you a government official under Section 4946 of the Internal Revenue Code? *
   ○ Yes, I am a government official.
   ○ No, I am not a government official.
Health Policy Research Scholars 2018 Call for Applications

Applicant Key Contact Information *

Instruction:

Complete the "HPRS Applicant" information below prior to inviting your confidential references in the "Letters of Reference" section.

- Please enter all required contact information for the applicant (including home contact information).
- To save your partially completed page, scroll to the bottom of this page and select "Save, continue editing" or "Save, return home."
- Use the "Copy" feature to copy completed institutional and address information to a new contact. Choose a role from the drop-down menu and then select the "Copy" button.

You may use the "Select contact information" link below to facilitate the entry of data required below. If the information already exists in the GuideStar Exchange or from prior activity with RWJF, the fields below will be prepopulated with the required data. If that occurs, please be sure to proofread the information to ensure that it is accurate and current. Feel free to edit as needed. Use this link to learn more about this feature. If, instead, you prefer to manually enter all the required information below, you may do so.

Health Policy Research Scholars (HPRS) Applicant *

This is the student who will be the Health Policy Research Scholar. This student will be the primary recipient of all key Foundation correspondence: copy of award notice, post-award financial and monitoring, and grant closure. Additionally, after the application is submitted, this student will be asked to provide feedback to an independent survey firm on the application process and applicant characteristics in a brief online survey. RWJF will share this student's contact information, including email address, with the survey firm for the sole purpose of soliciting feedback. Note: "Applicant's Home Institution" is the doctoral-degree-conferring institution. Type the degrees you already have (i.e. BA, MPH) in the "Degree" box below.

* Indicates required

College/University Email *

Confirm College/University Email *

Prefix

First Name *
Middle Name or Initial

Last Name *

Suffix

Degree(s) *

Applicant's Home Institution *

Department

Address *

Address (line 2)

City *

State / Territory *

Zip / Postal Code *

Primary Phone Number *

Phone Ext.

Cell Number
fax number

website URL

hprs applicant's permanent address

if the hprs applicant’s permanent address is different from the hprs applicant address above, please complete this section.

* indicates required

secondary email *

confirm secondary email *

first name *

middle name or initial

last name *

home county *

address *

address (line 2)

city *
State / Territory *

Zip / Postal Code *

Phone Number *

Extension

Cell Phone

Fax

Alternate Contact *

Alternate contact information in the event the Foundation cannot reach you via the information provided on this application. By providing this contact information, you authorize the Foundation and the national program center to contact this person to request information on how to contact you.

Email *

Confirm Email *

First Name *

Middle Name

Last Name *

Degree(s)
Health Policy Research Scholars 2018 Call for Applications

Mentor Key Contact Information *

_instruction:

Provide information for the contacts listed below.

- Please enter all required information for the mentor and—if applicable—the co-mentor.
- To save your partially completed page, scroll to the bottom of this page and select "Save, continue editing" or "Save, return home."
- Use the "Copy feature" to copy completed institutional and address information to a new contact. Choose a role from the drop-down menu and then select the "Copy" button.

You may use the "Select contact information" link below to facilitate the entry of data required below. If the information already exists in the GuideStar Exchange or from prior activity with RWJF, the fields below will be prepopulated with the required data. If that occurs, please be sure to proofread the information to ensure that it is accurate and current. Feel free to edit as needed. Use this link to learn more about this feature. If, instead, you prefer to manually enter all the required information below, you may do so.

Home Institution Mentor *

The HPRS home institution mentor (required) will be responsible for the Health Policy Research Scholar's academic support and career guidance at the scholar's home institution. The home institution mentor will also attend the Fall Institute in-person during the first fall of the program.

* Indicates required

Mentor Email *

Confirm Mentor Email *

First Name *

Middle Name or Initial

Last Name *

Degree(s)
Co-Mentor

If applicant has also chosen a co-mentor, provide contact information.

* Indicates required

Co-Mentor Email *

Confirm Co-Mentor Email *

First Name *

Middle Name or Initial

Last Name *

Degree(s)

Institution *

Position *

Department

Address *

Address (line 2)

City *

Country
Letters of Reference (LOR)*

Instruction:
Complete the "HPRS Applicant" information (see "Applicant Key Contact Information" to the left) before inviting your references below.
A total of two letters of reference (LOR) at faculty members from your graduate or undergraduate institution are required.

Notes:
• One LOR must be from your home institution mentor or his or her designee.
• No LORs will be accepted from current or former RWJF staff, current or former RWJF Board of Trustees members, staff members from the national program center at George Washington University, national advisory committee members, application reviewers, or other RWJF national program centers.
• The CC feature is intended for the reference writer’s assistant or colleague. It is not intended for the applicants to CC themselves.
• Your information (the applicant’s) should be entered in the ‘Reference For’ field.

When you use the "Invite" link below, the reference writer will automatically receive an email message with login information and instructions for submitting letters of reference electronically. You will have the opportunity to add a personalized message to that automated email. We encourage you to include a greeting, as well as the due date for your application, in that message. Once the reference writer logs in, he/she will have access to complete instructions for providing LOR materials.

• You will not be able to submit your application without both letters.
• Please return to this section to monitor that references are submitted by March 14, 2018 at 3 p.m. ET, to enable your submission of the completed package well before the application deadline.
• If a reference is no longer able to fulfill his or her obligation within the stated timeframe, you may "Un-Invite" that reference and "Invite" another.
• Use the "Re-Invite" link to resend the email invitation with login instructions to a reference writer.

<table>
<thead>
<tr>
<th>Reference</th>
<th>Date Invited</th>
<th>Status</th>
</tr>
</thead>
</table>

- not intended for submission -
Applicant Questions*

Instruction:
As appropriate, respond to the questions listed below.

Education and Focus Area

1. What was your undergraduate major? *
   Select all that apply.

- Afro-American Studies
- American Indian Studies
- Anthropology
- Architecture
- Asian and/or Asian American Studies
- Biology/Biological Science
- Business
- Chemistry
- Communications
- Computer Science
- Criminology
- Cultural Studies
- Economics
- Education
- Engineering: Civil
- Engineering: Computer
- Engineering: Electrical
- Engineering: Other
- Engineering: Transportation
- English
- Environmental Science
- Ethnic Studies
- Gender Studies
- Geography
- Global Studies
- Other Major (please specify)
- Health Education
- Health Sciences
- Hispanic/Chicano/Latino Studies
- History
- International Relations
- Journalism
- Marketing
- Mathematics
- Music
- Neuroscience
- Nursing
- Pharmacy
- Philosophy
- Physics
- Political Science
- Pre Dentistry
- Pre Law
- Pre Med
- Psychology
- Public Health
- Public Policy
- Religious Studies/Divinity/Theology
- Social Work
- Sociology
- Urban Planning/Urban Studies
2. What is your primary doctoral field of study? *
- Anthropology
- Demography/population studies
- Economics
- Education
- History
- Political science
- Other (please specify)

3. Specify area of emphasis, certification, or specialization, if applicable.

4. Specify doctoral degree being sought (e.g., PhD, DSW, etc). *
5. **What topics or interest areas does your work target?**
   *Select all that apply.*

<table>
<thead>
<tr>
<th>Topic</th>
<th>Topic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addiction</td>
<td>Health Data &amp; IT</td>
</tr>
<tr>
<td>Adverse Childhood Experiences</td>
<td>Health Disparities</td>
</tr>
<tr>
<td>Alcoholism</td>
<td>Health Insurance Exchanges</td>
</tr>
<tr>
<td>Antibiotic Resistance</td>
<td>Health Reform</td>
</tr>
<tr>
<td>Behavioral and Mental Health</td>
<td>Healthy Food Access</td>
</tr>
<tr>
<td>Built Environment &amp; Health</td>
<td>Healthy Schools</td>
</tr>
<tr>
<td>Child Maltreatment</td>
<td>Individual Health Insurance</td>
</tr>
<tr>
<td>Childhood Obesity</td>
<td>Infectious Diseases</td>
</tr>
<tr>
<td>Disease Prevention &amp; Health Promotion</td>
<td>Leadership Development</td>
</tr>
<tr>
<td>Early Childhood Development</td>
<td>Life &amp; Behavioral Skills Training</td>
</tr>
<tr>
<td>Education</td>
<td>Medicaid &amp; CHIP</td>
</tr>
<tr>
<td>Education Policy, Health Policy</td>
<td>Nurses &amp; Nursing</td>
</tr>
<tr>
<td>Emergency Preparedness &amp; Response</td>
<td>Nutrition</td>
</tr>
<tr>
<td>Employer-Sponsored Insurance</td>
<td>Occupational Health</td>
</tr>
<tr>
<td>End of Life Care, Health Care Costs &amp; Quality</td>
<td>One Health</td>
</tr>
<tr>
<td>Environment</td>
<td>Oral Health</td>
</tr>
<tr>
<td>Family &amp; Social Support</td>
<td>Patient-Centered Care</td>
</tr>
<tr>
<td>Food Insecurity</td>
<td>Prescription Drugs</td>
</tr>
<tr>
<td>Health Care Access</td>
<td>Public &amp; Community Health</td>
</tr>
<tr>
<td>Health Care Costs</td>
<td>Public Policy</td>
</tr>
<tr>
<td>Health Care Coverage</td>
<td>Social Determinants of Health</td>
</tr>
<tr>
<td>Health Care Education &amp; Training</td>
<td>Substance Abuse Treatments</td>
</tr>
<tr>
<td>Health Care Equity &amp; Trust</td>
<td>Substance Use</td>
</tr>
<tr>
<td>Health Care Payment Reform</td>
<td>Tax Policy</td>
</tr>
<tr>
<td>Health Care Quality</td>
<td>Tobacco Control</td>
</tr>
<tr>
<td>Health Care Transportation</td>
<td>Uninsured Individuals</td>
</tr>
<tr>
<td>Health Care Workforce</td>
<td>Violence &amp; Trauma</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td></td>
</tr>
</tbody>
</table>

6. **Use the space below to indicate a sub-topic or sub-area of interest.**

*If you do not have a sub-topic or sub-area of interest, you may skip this question.*

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7. Is there a specific population you are focusing on? * 
   Select all that apply.

☐ Not applicable  ☐ Military/Veterans
☐ Adolescents  ☐ Native Alaska
☐ African-American / Black  ☐ Pacific Islanders
☐ Asian  ☐ Parents and Families
☐ At-Risk/Vulnerable Populations  ☐ People Living with HIV/AIDS
☐ Children & Families  ☐ People With Addictions
☐ Disabled People  ☐ People With Disabilities
☐ Elderly  ☐ Poor/Economically Disadvantaged
☐ Foster Youth & Families  ☐ Puerto Rico, Caribbean Region
☐ Hispanic/Latino  ☐ Rural Populations
☐ Homeless Populations  ☐ Single Parents
☐ Immigrants and Refugees  ☐ Tobacco Users
☐ Incarcerated Populations  ☐ Tribal Communities
☐ Inmates and Former Inmates  ☐ Urban Communities
☐ LGBTQ Communities  ☐ Victims of Crime
☐ Low-Income Communities  ☐ Women's Health
☐ Men's Health  ☐ Youth
☐ Migrant Workers
☐ Other (please specify)

8. In what month and year did you begin your doctoral program? *
   (MM / YYYY)


9. What is your anticipated DOCTORAL completion/graduation date? *
   MM/YYYY


10. What is your current graduate GPA in your doctoral program? *
    Please enter as a numeric response (e.g., 3.5 or 4.0) If your institution does not calculate GPA, enter n/a.


11. List all undergraduate AND graduate (if applicable) institutions attended. *
Include: Name, City, State, and Dates Attended (MM/YYYY - MM/YYYY)
For example (University of Taiwan; City, Taiwan; 08/2001-05/2006); (University of Learning; Albuquerque, NM; 08/2001-05/2003)

Demographics
The Health Policy Research Scholars program is open to full-time students who are from underrepresented populations and/or disadvantaged backgrounds whose racial, socio-economic, ability status and personal factors allow them to bring unique and diverse perspectives to their research. The questions below ask that you provide more detail on how your background meets the eligibility requirements and how your background has influenced the perspectives you bring to your research.

12. If you selected racial or ethnic background for question one in the "Eligibility" section, please select the best description of your race and/or ethnicity. *
Select all that apply or select "Not Applicable."

- African American/Black (specify below)
- American Indian or Alaskan Native (specify tribal affiliation below)
- Asian (specify country or family origin below)
- Hispanic or Latino(a) (specify country below)
- Native Hawaiian or Pacific Islander (specify below)
- Not applicable
- Other (please specify)

13. If you selected educational background for question one in the Eligibility section, please specify your disadvantaged educational background. *
Select all that apply or select "Not Applicable."

- First-generation college graduate
- English is a second language (specify primary language below)
- Learning or other disability (specify below)
- Not applicable
- Other (please specify)
14. If you selected financial background for question one in the "Eligibility" section, please specify your disadvantaged financial background.*
   Select all that apply or select "Not Applicable."
   - Urban low-income community
   - Rural low-income community
   - Pell-Grant-eligible as an undergraduate
   - Received free or reduced-cost lunch benefits
   - Not applicable
   - Other (please specify)

15. Please describe whether your background noted above has influenced your academic and career path and, if so, how? *
   Maximum of 1,700 characters including spaces. (approximately 250 words)

16. Please describe how your academic background has prepared you to be a Health Policy Research Scholar.*
   Maximum of 1,700 characters including spaces (approximately 250 words)

17. Describe how your past leadership experiences are related to the HPRS program goals. (See the "Program Goals" section of the CFA, located in the "Resources area to the left.)*
   Maximum of 1,700 characters including spaces (approximately 250 words)

18. List any achievements that you believe demonstrate your commitment to the HPRS program goals.*
   Maximum of 750 characters, including spaces. (approximately 100 words)
19. Optional: list any other achievements (i.e., honors or awards) related to the HPRS program goals.
   Maximum of 750 characters, including spaces. (approximately 100 words)

20. How is the HPRS program related to your educational and personal life goals? *
    Maximum of 750 characters, including spaces. (approximately 100 words)

Future Career Path
21. What is your future career focus? *
    Select the one most representative of your future career focus.

22. What is your anticipated future career setting? *

23. How would the HPRS program be most helpful for your future career? *
    Maximum of 750 characters, including spaces. (approximately 100 words)

Other Questions
Your responses to the following questions do not impact your chances of getting into this program.
24. How did you hear about the Health Policy Research Scholars (HPRS) program? *
Select all that apply.

- HPRS website (http://healthpolicyresearch-scholars.org/)
- RWJF.org website
- Other website (specify below)
- Association newsletter (specify below)
- Conference (specify below)
- Email from RWJF
- Other email (specify below)
- Facebook
- Twitter
- Other social media
- Listserv (specify below)
- Word of mouth/notified by a friend
- Current participant
- Other (please specify)

25. Have you previously applied to RWJF for funding or support of any kind? *
- Yes
- No

26. Were you funded? *
- Yes
- No

27. Was your funding for a previous leadership program? *
- No
- Yes (provide name of program(s))

28. Was your funding for a grant other than a leadership program? *
- No
- Yes (provide name of grant(s))

29. I agree to be contacted to answer questions to help evaluate the effectiveness of the HPRS application process and program or to learn more about the Foundation's leadership programs. *
- Yes
- No
## Health Policy Research Scholars 2018 Call for Applications

### Supporting Documents *

- **Instruction:**
  
  The following supporting documents are either required or optional, as indicated:

  1. Applicant Essays *(required)*
  2. Applicant Curriculum Vitae (CV) *(required)*
  3. Applicant Transcripts *(required)*
  4. Home Institution Mentor CV(s) *(required)*
  5. Appendices *(optional)*

- **To Begin:** Download the applicant essay template shown below and complete it as instructed. In addition, you’ll be asked to upload your CV, transcript, and optional appendices.

- **To Upload:** Upload the completed document(s) by selecting the "Upload" button below. For assistance with uploading, refer to the “Upload Documents” section of the "Applicant Guide," (see "Resources" area on the left).

  When you have completed this page, select the "Save section finished" button at the bottom of the page. Once all sections of your application are complete, you may "Submit" from the Home page. All uploaded documents may be updated and replaced until you submit your application.

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<table>
<thead>
<tr>
<th>Description</th>
<th>Templates</th>
<th>Uploaded Documents</th>
</tr>
</thead>
</table>
| **Applicant Essays **
Download the template in the "Templates" column to the right, and follow the instructions carefully.  
To maintain the original formatting, you **must convert your document to a PDF prior to uploading.** For additional information, refer to “Troubleshooting Tips,” (see "Resources" area on the left).

*Maximum of three pages.* |
| Applicant Essays | | |

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<table>
<thead>
<tr>
<th>Description</th>
<th>Templates</th>
<th>Uploaded Documents</th>
</tr>
</thead>
</table>
| **Applicant Curriculum Vitae (CV) **
The information in your CV complements the other information you and your referees provide in this application. If applicable, please include information regarding qualifications and experiences that you have obtained that are related to the HPRS Program. Please include experiences outside | | |
of past academic pursuits (e.g., leadership in professional and service organizations, volunteer/pro bono work or community service, participation in service projects, community organizing, legislative advocacy, service as a non-profit board member).

You may format your CV in any way you want.

To maintain the original formatting, you must convert your document to a PDF prior to uploading. For additional information, refer to "Troubleshooting Tips," (see "Resources" area on the left).

Maximum of one four-page CV.

Transcripts *

Use this area to provide copies of your unofficial transcripts. Ensure the transcript includes your name and is not secured or password-protected. A secured or password-protected PDF will have a padlock icon in the upper left corner of the document. If you are unable to remove the security, please print the document, scan it, and save it as a new, unprotected PDF before you upload it.

Upload copies of your current doctoral transcript(s)

You may upload up to 10 transcripts. If you have more than 10 transcripts, you may combine two or more and upload as one document.

AN OFFICIAL GRADUATE TRANSCRIPT WILL BE REQUIRED UPON ACCEPTANCE.

To maintain the original formatting, you must convert your document to a PDF prior to uploading. For additional information, refer to "Troubleshooting Tips," (see "Resources" area on the left).

Home Institution Mentor CV(s) *

Ask that your home institution mentor to provide you with their CV (revised 2015 NIH format preferred.) Upload the CV(s) as part of your application.

We prefer a 2015 formatted National Institutes of Health biosketch; however, the home institution mentor may format his or
her CV in any way as long as it includes publications most relevant to this application, as well as current and past grant support. If you have more than one mentor, you must upload a CV for each mentor.

To maintain the original formatting, you must convert your document to a PDF prior to uploading. For additional information, refer to "Troubleshooting Tips," (see "Resources" area on the left).

Maximum of two 15-page CVs.

## Appendices

While most applicants will not use this section of the application, some applicants may need to submit additional documentation with their application.

If you choose to submit appendices, download the template in the "Templates" column to the right, and follow the instructions carefully.

To maintain the original formatting, you must convert your document to a PDF prior to uploading. For additional information, refer to "Troubleshooting Tips," (see "Resources" area on the left).

Maximum of two four-page documents.
Health Policy Research Scholars Program
Applicant Essays

Instructions for using this template:

Use this template to respond to the essay questions below.

You should:
- Print or save this template in its entirety before you begin, so you have the instructions available at all times.
- Complete the identifying information shown below this block of instructions.
- Leave the essay numbers listed below and use them as an organizational tool. However, delete the instructions in blue under each number.
- Delete this block of instructions before uploading your application narrative.
- Save your final essays as a PDF. In the “Resources” area on the left of the online system, you will find the “Applicant Guide.” Within the guide, there are links to “Upload Documents” and “Troubleshooting Tips” for converting your document to a PDF.
- Upload the PDF to the “Supporting Documents” section of the online system.

NOTES:
- Your entire essay, including essay numbers, should be no more than three pages with single spacing and one-inch margins on the top, bottom and sides of the page.
- Do not adjust the font/size of this template.
- You will not be able to upload a document that is longer than three pages.
- No hard-copy materials be accepted.

Remember to delete this block of instructions—and the guidelines shown in blue under each essay number—before uploading this template.

Identifying Information
Application I.D.: (your application ID goes here—found in the upper right corner of any screen in this online system)
 Applicant Name: (your name goes here)
 Applicant Home Institution: (legal name of applicant home institution goes here)

Essay #1
Briefly describe your research interests and how they are relevant to the HPRS Program.
   a. Then, describe how the Health Policy Research Scholars Program can provide valuable skills for your future career goals.

(Maximum of 350 words)

Essay #2
Briefly describe your major personal strengths that can help you overcome barriers that might impede your success as a Health Policy Research Scholar.

(Maximum of 250 words)
Essay #3
Briefly describe your leadership, service and organizational skills that can empower you as a Health Policy Research Scholar to promote a Culture of Health for the next generation.

(Maximum of 250 words)

Essay #4
Briefly explain why you believe the Health Policy Research Scholars Program is important to achieving health equity.

a. Then, explain why health disparity and equity issues are personally important to you.

b. Finally, select at least one Action Area below to support how you might use your research to contribute to health equity in the context of building a Culture of Health in America.

(Maximum of 500 words)

The Robert Wood Johnson Foundation has developed the Culture of Health Action Framework to help our nation broaden the discussion about health, set goals, and integrate efforts to improve the health of the U.S. population. This framework translates the many actors, and the many facets, of a Culture of Health into four interconnected Action Areas. To learn more about the Culture of Health Action Framework, visit www.cultureofhealth.org

The Culture Of Health Action Areas are:

1. **Making Health a Shared Value**, measured by indicators such as the percentage of people who strongly agree that health is influenced by their peers and their communities and the percentage who indicate they have adequate social support from family and friends.

2. **Fostering Cross-Sector Collaboration to Improve Well-Being**, denoted by measures like the number of local health departments that collaborate with community institutions and employers who promote better health in the workplace.

3. **Creating Healthier, More Equitable Communities**, using measurements such as the number of grocery stores, farmers’ markets, and safe sidewalks in communities; the ratio of children attending preschool; and the affordability of housing.

4. **Strengthening Integration of Health Services and Systems**, gauged by measures such as the percentage of people served by a comprehensive public health system and the percentage of physicians sharing electronic data with other clinicians, health systems and patients.
Health Policy Research Scholars
Optional Appendices

Instructions for using this template:

This template may be used to provide additional information in support of your application. You will need to follow the instructions below only if you choose to submit appendices. If appendices are not applicable, you do not need to upload this template.

You should:

- Print this template in its entirety before you begin, so you have the instructions available at all times.
- Complete the identifying information shown below this block of instructions.
- Complete the appendices section below. Include a list of what you are uploading (ex: "letter from department stating that I will be a 2nd year student in fall 2018. I was part-time for the last year and a half"). Also include an explanation of why you are including as part of your application.
- Delete this block of instructions before uploading your appendices.
- Save your final appendices template as a PDF. In the “Resources” area on the left of the online system, you will find the “Applicant Guide.” Within the guide, there are links to “Upload Documents” and “Troubleshooting Tips” for converting your document to a PDF.
- Upload the PDF to the “Supporting Documents” section of the online system.

NOTES:

- Each uploaded appendix may not exceed four pages.
- You may upload each appendix individually. After each upload, another “Upload” button will appear; however, do not upload more than two appendices. A “Remove” button will also appear, in case you need to delete a document.

Remember to delete this block of instructions—and the guidelines shown in blue under each essay number—before uploading this template.

Identifying Information
Application I.D.: (your application ID goes here—found in the upper right corner of any screen in this online system)
Applicant Name: (your name goes here)
Applicant Home Institution: (legal name of applicant home institution goes here)

Appendices (List below the materials that you are submitting as appendices. Include an explanation of why you are including as part of your application.)