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ACRP Fellowship Application (Print Version)

Eligibility

ACRP Members are eligible to apply for Fellowship when the following application requirements are met:

1) Held ACRP membership in good standing for the previous five years.
2) Demonstrated evidence of active participation with ACRP.
3) Demonstrated evidence of significant contributions to the field of Clinical Research.
4) Paid the application fee of $150. You will be billed for this fee after you have submitted your application.

Instructions for Completing the Application

Gather the following documentation before beginning this application. You will be asked to upload several files. Your application will not be considered without the attachments/appropriate verification of your experience.

1) One (1) Letter of Recommendation from a current ACRP Member In-Good-Standing.
2) One (1) Letter of Support from a current/previous employer (if self-employed, a letter from a previous customer will suffice) indicating time of service and contributions in clinical research (minimum of 5-years-experience required)
3) An up-to-date Curriculum Vitae (CV) – Maximum 8 pages in length
4) Documentation that verifies the experience you enter into the application as requested in the sections below:

· Section B - one file with documentation to verify your global and chapter board/committee experience as well as your additional contributions to ACRP
· Section C - one file with documentation to verify all listed contributions to clinical research

Documentation should include dates of service and the name of the role/position. Preferred documentation is a letter from someone who can verify this information. However, a brief (less than 100 words) description that includes the contact information of someone who can verify your role may also be accepted. Citations from academic journals, newspaper publications, etc. must be listed. A copy of the printed program of a professional society meeting (or printout from a web page) will constitute proof of presentation or a scientific poster presented at a scientific/academic meeting. Clearly label applicable sections of the document. Listing on a CV is not necessarily acceptable verification.

Questions with an asterisk are required

Scoring

To be considered for Fellows status, an applicant must have at least 100 points total AND the minimum points required for each section (A, B, and C). The amount of points you may earn for each response is noted.

A scoring calculator spreadsheet is provided as a companion resource to this application to help you calculate your points and ensure you have gathered and numbered all supporting documentation. (https://acrpnet.org/download/fellowship-scoring-calculator/). This document is optional, but encouraged by the Fellows Advisory Panel to ease your application process and ensure the accuracy of your scoring. If you use the spreadsheet while completing your application, please submit it to help the Panel in reviewing your application.

TIP - make sure you have the minimum points for each section and 100 points overall before submitting your application.

Final approval of all applications for Fellowship is the responsibility of the Fellowship Advisory Panel as delegated by ACRP's Board of Trustees

Name *

First

Middle Initial (optional)

Last

Suffix/Certifications

Email *

Enter Email

Confirm Email

Preferred Phone *

Address *

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Street Address

Address Line 2

City

State / Province / Region

ZIP / Postal Code

United States   ⌄

Country

Job Title *

Organization Name *

Are you a current member in good standing with ACRP and have been a member for the previous five years? *

○ Yes

○ No

Are you a member of an ACRP Chapter? *

○ Yes

○ No

If Yes, please list which chapter.

Section A: ACRP Certification and Continuing Education
A minimum of 15 points is required in this section.

A1. ACRP Certification: Which of the following current ACRP certifications do you hold? *

☐ ACRP-CP (20 points)

☐ CCRA (20 points)

☐ CCRC (20 points)

☐ CPI (20 points)

☐ ACRP-MDP Subspecialty (10 points)

☐ ACRP-PM Subspecialty (10 points)

☐ No ACRP Certifications (0 points)

A2. ACRP Contact Hours: If additional points are desired for Section A, you may list here the number of ACRP contact hours you have earned for up to the past five years. (0.5 points will be awarded for each ACRP contact hour). NOTE: ONLY ACRP CONTACT HOURS WILL BE ACCEPTED, NOT HOURS FROM OTHER ORGANIZATIONS.

List # of contact hours.

[To view your contact hours, go to: https://member.acrpnet.org, click the CERTIFICATIONS button, click on any of your certifications under My Account Links, click Activity Points Requirement, click View AP Transcript (all AP). Your contact hour history will appear. Please count only ACRP hours. If you do not hold an ACRP certification, go to: https://member.acrpnet.org, click the CONTACT HOURS button. If you need assistance, email certification@acrpnet.org.]

Multiply # of ACRP contact hours listed above X 0.5 points per contact hour

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Total contact hour points.

Total Number of Points Claiming for Section A (A1 + A2). (15 points minimum required) *

Section B: Contributions to ACRP

You must submit documentation that verifies your contributions at the end of this section. Number each with the corresponding section number. A minimum of 20 points is required in this section.

B1. ACRP Global Committees. List how many YEARS (if any) you have served on each ACRP GLOBAL Committee. (2.5 points will be awarded per year)

ACRP Awards/Recognition Committee	ACRP Content Committee (includes Editorial, Conference Advisory, Training & Dev.)	ACRP Nominating Committee	ACRP Professional Ethics Committee	ACRP Regulatory Affairs Committee	Academy Exam Committee	Academy Nominating Committee	ACRP Diversity Advisory Council

You must submit documentation to verify this service at the end of this section. Number each with the corresponding section number.

B1. Points Claimed for Global Committees (Total numbers of YEARS listed in B1 above x 2.5 points) *

B2. ACRP Global Boards. List how many YEARS (if any) you have served on each ACRP GLOBAL Board. (5 points will be awarded per year)

ACRP Board of Trustees	Academy Board of Trustees

You must submit documentation to verify this service at the end of this section. Number each with the corresponding section number.

B2. Points Claimed for Global Boards (Total numbers of YEARS listed in B2 above x 5 points) *

B3. Other ACRP Global Committee Service: Please list any other ACRP GLOBAL committees on which you have served and note for how many years. (ex. job task force, working group, workforce innovation) (2.5 points will be awarded per year)

You must submit documentation to verify this service at the end of this section. Number each with the corresponding section number.

B3. Points Claimed for Other ACRP Global Committee Service (Total numbers of YEARS listed in B3 above x 2.5 points) *

B4. ACRP GLOBAL Committee/Board LEADERSHIP: Please note if you have served a leadership role in any of the above GLOBAL committees/boards (Chair, Vice Chair, Treasurer, Secretary). List the committee/board, your role(s) held, and how many YEARS you served in the role. (7.5 points per year for Board Chair; 5 points per year for other Board leadership role; 5 points per year for Global Committee leadership)

You must submit documentation to verify this service at the end of this section. Number each with the corresponding section number.

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B4. Points Claimed for ACRP Global Committee/Board Leadership (Total numbers of YEARS listed in B4 above x 7.5 points per year for Board Chair, PLUS 5 points per year for other Board leadership role, PLUS 5 points per year for Global Committee leadership) *

B5. ACRP CHAPTER Service: Please note if you have served on a CHAPTER board or committee. List your role on the board or committee (Chair/President, Vice Chair/President-Elect, Treasurer, Secretary; Board Member; Committee Member), the number of years served in each role, and whether you were appointed or elected. (5 points per year will be awarded for elected chapter leader; 2.5 points per year for appointed chapter leader; 2 points per year will be awarded for chapter board or committee member)

You must submit documentation to verify this service at the end of this section. Number each with the corresponding section number.

B5. Points Claimed for ACRP CHAPTER Service (Total numbers of YEARS listed in B5 above x 5 points per year for elected chapter leader, PLUS 2.5 points per year for appointed chapter leader, PLUS 2 points per year for chapter board or committee member) *

B6. Contributions to ACRP: List how many TIMES (if any) you have presented a poster at an ACRP conference. (3 points will be awarded per time)

You must submit documentation to verify these contributions at the end of this section. Number each with the corresponding section number.

B6. Points Claimed for presenting poster at an ACRP conference (Total numbers of TIMES listed in B6 above x 3 points) *

B7. Contributions to ACRP: List how many TIMES (if any) you have made the following contributions to ACRP. (5 points will be awarded per time)

Presented workshop or session at an ACRP conference	Presented ACRP webinar or eLearning course	Published in ACRP Publication (Clinical Researcher, CR Beat, Blog)	Served as an ACRP Item Writer	Served as an ACRP expert content reviewer	Represented ACRP to media; media contact must be assigned by ACRP

You must submit documentation to verify these contributions at the end of this section. Number each with the corresponding section number.

B7. Points Claimed for B7 contributions to ACRP (Total numbers of TIMES listed in B7 above x 5 points) *

B8. Contributions to ACRP: List how many TIMES (if any) you have made the following contributions to ACRP. (10 points will be awarded per time)

Presented ACRP training/development program	Developed training module for ACRP	Appointed ACRP liaison or rep. to advisory panel, coalition, or organization

You must submit documentation to verify these contributions at the end of this section. Number each with the corresponding section number.

B8. Points Claimed for B8 contributions to ACRP (Total numbers of TIMES listed in B8 above x 10 points) *

B9. Other Contributions to ACRP noted here will be considered by the Advisory Panel on a case-by-case basis.

You must submit documentation to verify this service at the end of this section. Number each with the corresponding section n

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Please upload one file with documentation to verify all of your ACRP global and chapter board and committee experience as well as your additional contributions to ACRP in section B (B1-B9) *

Choose File | No file chosen
Max. file size: 75 MB.

Additional files if needed.

Choose File | No file chosen
Max. file size: 75 MB.

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Max. file size: 75 MB.

Total Number of Points Claiming for Section B (B1+B2+B3+B4+B5+B6+B7+B8). (20 points minimum required) *

Section C: Contributions to the Field of Clinical Research

You must submit documentation that verifies each contribution at the end of this section. Number each with the corresponding section number. Contributions should be in at least two (2) categories below. A minimum of 20 points is required in this section.

C1. List how many TIMES you have made contributions in each category below to the field of clinical research (non-ACRP). (3 points will be awarded per time)

Authorship of protocol or other health authority submission documents	Conference presenter	Service on healthcare-related exam committee	Listed as sub-I on statement of investigator form/1572 (max of 9 points allowed)	Item writer - non ACRP	Merit reviewer for grant-funded clinical research proposals	Journal Article Peer Reviewer

You must submit documentation to verify the contributions at the end of this section. Number each with the corresponding section number.

C1. Points Claimed for Contributions to Clinical Research in C1 above (Total numbers of TIMES listed in C1 above x 3 points) *

C2. List how many TIMES you have made contributions in each category below to the field of clinical research (non-ACRP). (5 points will be awarded per time)

Curriculum development	Design, write, or present a clinical research program	Listed as PI on statement of investigator form/1572-PI (max of 10 points allowed)	Journal editorial board	Named participation in a research specific committee, panel, or mtg	New marketing application process	Publish research in a peer reviewed journal	Presentation at an investigator meeting	Service on DSMB/IDMC	Service on an Ethics Committee (IRB, IEC, REB)	T a a fa a p a a ir

You must submit documentation to verify the contributions at the end of this section. Number each with the corresponding section number.

C2. Points Claimed for Contributions to Clinical Research in C2 above (Total numbers of TIMES listed in C2 above x 5 points) *

C3. List how many TIMES you have made contributions in this category: Board Service/Public Health Research (non-ACRP). (7 points will be awarded per time)

You must submit documentation to verify these contributions at the end of this section. Number each with the corresponding section number.

C3. Points Claimed for Contributions in C3 above (Total numbers of TIMES listed in C3 above x 7 points) *

C4. Other contributions to the field of clinical research (non-ACRP) noted here will be considered by the Fellows Advisory Panel on a case-by-case basis.

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> [ ]

You must submit documentation to verify this service at the end of this section. Number each with the corresponding section number.

Please upload one file with documentation to verify all listed contributions to clinical research (C1-C4). *

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Max. file size: 75 MB.

Additional files if needed.

[Choose File] No file chosen
Max. file size: 75 MB.

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Max. file size: 75 MB.

Total Number of Points Claiming for Section C (C1+C2+C3). (20 points minimum required) *

[   ]

GRAND TOTAL Points for Sections, A, B, and C combined (must be 100 or more) *

[   ]

Please upload your completed Scoring Calculator spreadsheet (if you used it) to help the Panel in reviewing your application

[Choose File] No file chosen
Max. file size: 75 MB.

SECTION D: Personal Statement, Reference Letters, and CV

D1. What makes ACRP and our mission meaningful to you? (maximum 300 words) *

[   ]

D2. Please upload one (1) letter of recommendation from a current ACRP member in good standing. *

[Choose File] No file chosen
Max. file size: 75 MB.

D3. Please upload one (1) letter of support from a current/previous employer (if self-employed, a letter from a previous customer will suffice) indicating time of service and contributions in clinical research (minimum of 5-years-experience required). *

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Max. file size: 75 MB.

D4. Please upload an up-to-date resume/Curriculum Vitae (CV) – Maximum 8 pages in length. *

[Choose File] No file chosen
Max. file size: 75 MB.

Disclaimer and Consent

I certify that my answers are true and complete to the best of my knowledge. If this application leads to being selected as a Fellow, I understand that false or misleading information in my application or interview may result in my release. *

○ I agree

○ I do not agree

Submit

Save and Continue Later

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