

# Yale Office for Postdoctoral Affairs

## Postgraduate Application

**Postgraduate Rank:** Postgraduate appointments may be made under certain circumstances to invite individuals who have completed a bachelor's, master's, or equivalent degree to come to Yale for advanced training under a ladder rank faculty mentor. Appointments are preceded by this application and must be submitted to the Office for Postdoctoral Affairs for approval prior to extending an invitation to the candidate AND prior to requesting a visa through OISS. There are two categories of appointees: **Postgraduate Associates** and **Postgraduate Fellows**. The difference arises from the funding source. Appointees funded from Yale-administered research grants, contracts, or other University sources are classified as Postgraduate Associates and are Yale employees. By contrast, Postgraduate Fellows are supported from funding awarded to the trainee from an external source and are not Yale employees, but still have status within the university associated with the postgraduate appointment. All are short-term appointments for one year, renewable for a second year.

**1. Non-Student Appointments:** Candidates who are not currently matriculated in a degree-granting program at another institution.

A. Additional documentation to include with the application:

**i. Health insurance:** If the candidate's source of health insurance is not Yale, please provide proof of insurance for the requested duration of the appointment.

**ii. Stipend:** A stipend of at least **\$3,800 per month** is required. If the funding source is outside of Yale (e.g. fellowship, home institution, outside government, or another not-for-profit) please provide proof of funding. If the currency is in a foreign currency, please provide the currency conversion to U.S. dollars. Please note: Personal funds are not eligible for non-student Postgraduate appointments.

**iii. CV:** A current and accurate version of the candidate's CV is required.

**2. Visiting Students:** Postgraduate Appointments may be made for visiting students matriculated in a degree-granting program at another institution only where an agreement exists between that institution and Yale University. For appointees in this category, the application must include information on the agreement between that institution and Yale University (e.g. Quinnipiac University Netter Medical School Students). This appointment category is not appropriate for doctoral degree candidates carrying out thesis research at Yale; instead, these students should be Visiting Assistants in Research through the Graduate School of Arts and Sciences. Visiting medical students and Physician Associate students who wish to do a clinical rotation are also ineligible and should apply to the 'Clinical Electives Program' through the YSM Office of Student Affairs or the Yale Physician Associate Program.

A. Additional documentation to include with the application:

**i. Health insurance:** If the candidate's source of health insurance is not Yale, please provide proof of insurance for the requested duration of the appointment.

**ii. Stipend:** A stipend of at least \$3,800 per month is required. If the funding source is outside of Yale (e.g. fellowship, home institution, outside government, or another not-for-profit) please provide proof of funding. If the currency is in a foreign currency, please provide the currency conversion to U.S. dollars.

**iii. CV:** A current and accurate version of the candidate's CV is required.

*\* Please use Adobe Acrobat to complete this form electronically.*

## Postgraduate Application

Reset Form

INSTRUCTIONS: This form should be completed in Adobe Acrobat and submitted via email to *postdoc.affairs@yale.edu*. Appointments are preceded by this application and must be submitted to the Office for Postdoctoral Affairs for approval *prior* to extending an invitation to the candidate AND prior to requesting a visa through OISS.

**The application must be completed by the faculty mentor and/or departmental representative.**

### 1. General Information

Applicant Name:

First

Last

Faculty Mentor Name:

First

Last

Nation of Citizenship:

Department:

Highest Degree Earned:

Lab Address (Bldg & Rm):

### 2. Non-Student appointments Only

Complete this section only if the candidate is not currently enrolled in a degree-granting program at another institution. Personal funds cannot be used for these types of appointments.

Duration of appointment:

Weeks

Months

Year (maximum of 1 year)

Proposed start and end dates of appointment:

Funding sources (at least \$3,800/month):

Name of Source

Monthly Amount

Yale:

Fellowship:

Other:

TOTAL per month:

Source of Health insurance:

Yale:

Other:

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**3. YEAR ONE of training**

Detail the **education, training,** and **mentoring** the appointee will receive.

**The department confirms that the trainee will not perform duties normally expected of Yale staff.**

Name of Yale personnel completing application:  Date:

Name of HR Generalist:  Name of Lead Administrator:

<b><i>For Postdoctoral Affairs use only</i></b>			
Approved <input type="radio"/>	Not Approved <input type="radio"/>	Signature: _____	Date: _____
Type of Appointment: Postgraduate Associate <input type="radio"/>	Postgraduate Fellow <input type="radio"/>		