

AAP Teaching Fellowship



BACKGROUND

Full-time faculty are the backbone of the dental professional educational process, bearing responsibility for predoctoral and postdoctoral periodontal education. The recruitment and retention of full-time faculty is one of the most pressing problems facing periodontal education. To address this concern, the American Academy of Periodontology (AAP) provided a major grant to the AAP Foundation in order to establish the AAP Teaching Fellowship program. These Fellowships are intended to underwrite educational debt relief for young periodontal faculty.

ELIGIBILITY

Applicants for the Teaching Fellowships must be in their first three years of full-time (as defined by the institution) teaching at a periodontal program in the United States. Individuals who have not yet begun work as an educator but who present a letter stating they have accepted a full-time teaching position may also apply. Applicants must be student or active members of the AAP. Previous recipients of any other awards offered by the AAP Foundation are eligible to apply. Applicants for other Foundation awards also may apply for the AAP Teaching Fellowships.

AWARD

Each Fellow will receive an award of \$50,000 at the end of the teaching year. The award goes directly to the Fellow. The award is intended to address educational debt but may be used in any way he/she desires. Applicants may receive a maximum of three years of funding, as long as they meet eligibility requirements. If the Fellow does not complete a full year of full-time teaching for the Fellowship period, he/she is not eligible to receive the award at the end of the teaching year.

THE ROLE OF THE INSTITUTION

The institution must agree that the Fellowship will not replace any stipend or salary to which the recipient is entitled. The institution also must identify an individual who will mentor the Fellow as he/she continues to develop as an educator.

APPLICATION PROCESS

Completed applications must be received by the Foundation on or before July 1. The components of the application may be mailed separately as they are available, or they may be mailed together. The application packet must include:

- Completed application form
- Dental school transcripts
- Periodontal program transcripts
- Curriculum vitae
- A letter of nomination from the periodontal chair or other appropriate individual from his/her employing institution. If someone other than the chair will serve as the Fellow's mentor, he/she also should write a letter supporting the nomination.
- Two letters of recommendation
- An essay of approximately 1,000 words which addresses the applicant's commitment to education

The applications will be reviewed by a selection committee appointed by the AAP Foundation President. Finalists for the Fellowship will be invited to attend a mandatory personal interview with the selection committee. The interviews will be held during the AAP Annual Meeting. Transportation and housing costs will be the responsibility of the finalist. If the applicant reaches the level of finalist, members of the selection committee may call writers of recommendation letters and individuals mentioned by name in the applicant's personal statements and/or application letters.

APPLICATION FORM

Must be received by AAP Foundation by July 1

AAP Teaching Fellowship
AAP Foundation
737 N. Michigan Ave., Suite 800
Chicago, IL 60611-2690

Questions? Please contact:
Sharon Mellor, CAE
AAP Foundation Executive Director
1-800-282-4867, ext. 3256
sharon@perio.org

TO BE COMPLETED BY THE FELLOWSHIP APPLICANT

Name of Applicant _____

Address _____

City _____ State _____ Zip _____

Daytime phone _____ Evening phone _____

E-mail address _____

Teaching at which periodontal program _____

Beginning of academic year _____ End of academic year _____

Signature _____ Date _____

Is the applicant a previous recipient of an AAP Teaching Fellowship or an AAP Educator Scholarship?

If "yes," please provide the years: _____

TO BE COMPLETED BY THE DEPARTMENT CHAIR

Name _____

Institution _____

Phone _____ E-mail address _____

By your signature below, you agree that the award would be a supplement to, not a replacement for, any salary, stipend, research support, or other funding to which the Fellow would normally be entitled.

Signature _____ Date _____

The American Academy of Periodontology Foundation

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