Research Associateship Programs

CHECKLIST

SELF-MANAGED APPLICATION

<u>IF YOUR APPLICATION PACKAGE DOES NOT CONTAIN ALL OF THE DOCUMENTS LISTED BELOW, YOUR APPLICATION WILL NOT BE REVIEWED.</u>

		n Associateship	Programs Office in Washington, I	C:
-	pplication (all four pages)			
	aboratory/Center Review (wi	ith only the top port	non completed)	
	esearch Proposal ppendix to the Research Pro	nocal		
	revious and Current Research		Senior form)	
	anscripts (Undergraduate an			
			each in a sealed & signed envelope (four)	
	nis signed Checklist	,		
	DEADLINI	E REMINDER	R - 2002	
Fall Review/Sur	mmer Faculty Fellowship	Programs applica	ations must be postmarked by November	r 1.
	DEADLINE	E REMINDER	R - 2003	
			ostmarked by February 1	
		_	postmarked by May 1	
			postmarked by August 1	
		ations must be po- icipates ONLY in the '	estmarked by November 1	
	*NAI participates ONL	-		
	FF			
Associate's name, the Lab	oratory or Center where the	e research is to be o	s website, information on awardees including conducted, the Research Adviser and the titur name posted, please check this box.	
Signatura			Date	
			uments listed for the Application package above	? .
Please also print your name	_			
•••				
	Applications should	be sent by exp	oress delivery to:	
		ssociateship Prog	rams	
		al Academies		
	2001 Wiscor	nsin Avenue, NW	' [GR 322A]	

Phone 202-334-2760 Fax 202-334-2759 E-mail rap@nas.edu

Washington, DC 20007

www.national-academies.org/rap

THE NATIONAL ACADEMIES

Advisers to the Nation on Science, Engineering, and Medicine

Research Associateship Programs

APPLICATION

We recommend that you print out and refer to the Instructions for this Application.

Enter information manually or electronically in Layout view.

ORIGINAL SIGNATURES required.

OFFICE USE ONLY			
ID			
Postdoctoral			
Senior			
Initials	•		

Applicant Last or	Family Name	I	First Na	ите			·	<u> </u>
Withers		1	Paul					
Middle Name		i	Maiden Name (if applicable)					
Gareth								
	Home or Institution, MailCode/Stop, B	ldg./Room, Number	/Street	Cit	ity		Zip (Posta	l) Code
CURRENT	3002 East Hawthorne Street			Tu	ucson		85716	
Address				Sta	ate / Province		Country	
				AZ	Z /		USA	
	Home or Institution, MailCode/Stop, B	Bldg./Room, Number	/Street	Cit	ity		Zip (Posta	l) Code
PERMANENT	39 Greenhill Lane,			Sta	afford		ST19 9P	L
Address	Wheaton Aston			Sta	ate / Province		Country	
					1		Great Br	itain
	Country							
CITIZENSHIP	Great Britain							
If you are a nati	ıralized US citizen, enter your naturali	ization date and nu	mber.	Da	ate Month / Day / Y	Year	Number	
				Vis	sa Type		Date Visa Status	Expires
If you are a no	on-US citizen already in the US, enter	the type of visa you	hold.	F -2			July 19, 2003	· I
If you are a US	S legal permanent resident, enter your o and <u>enclose</u> a copy of your alien				ien Registration Nu	mber	July 17, 2003	
Education: I	List in order, beginning with			ree	awarded or ex	vnecte	1	
	, 8		i ucgi		Awarded or	•		
	Name of University or College City, State/Province, Country	Inclusive Dates Year to Year	Degr	ree	Expected Month / Year		egree Discipline / F fer to Field Refer	
University of Ari	izona, Tucson, Arizona, USA	1998 - 2003	PhI	D	05 / 2003	Planet	ary Science	2173
University of Car	mbridge, Cambridge, Great Britain	1994 - 1998	MS	S	06 / 1998	Physics	3	8299
University of Car	mbridge, Cambridge, Great Britain	1994 - 1998	BA	1	06 / 1998	Physic	5	8299
		-			/			
		-			/			
		-			/			
A 11	4	1	4 1		11 '41 41	1* .	. 4 * 1	1

All transcripts for Postdoctoral applicants must be enclosed with the application package. Honors and Awards

Title	Complete Name of Institution	Inclusive Dates
Time	including City, State/Province, Country	Year to Year
Kuiper Memorial Award for excellence in academic work and research in Planetary Science	Lunar and Planetary Laboratory, University of Arizona, Tucson, Arizona, USA	2002 - 2002
Galileo Circle Graduate Scholarship	University of Arizona, Tucson, Arizona, USA	2001 - 2002
Highly Commended in Young Science Writer Contest	Daily Telegraph, London, Great Britain - a national newspaper	2000 - 2000
Graduate Registration Fellowships	University of Arizona, Tucson, Arizona, USA	1999 - 2002

	<i>APPLICATION</i>			OFFICE USE ONLY		
	717	continued	51	Last Name	ID	
Have you previously applied for	a National Academies A	ssociateship?			Year	
NO ☐ YES Select Ag	gency from list #1	or #2				
Are you a former National Acad		re?			Tenure Dates Year to Year	
NO ☐ YES Select Ag	gency from list #1	or #2			_	
Are you also applying for an Ale	xander von Humboldt Fe	oundation award at	this time?			
⊠ NO ☐ YES						
Employment - Profession	onal, Scientific, Ac	dministrative,	etc. List	in order, beginning	with most recent.	
Name of Organ including City, State/Pr		Employment S	Sector	Title or Academic Rank	Inclusive Dates Year to Year	
University of Arizona, Tucson		College/Univ	ersity	Research Associate	1998 - 2003	
Open University, Milton Key (summer)	nes, Great Britain	College/Univ	ersity	Research Consultant	2001 - 2001	
NASA Goddard Spaceflight C Maryland, USA (summer)	enter, Greenbelt,	Governme	ent	Research Assistant	2000 - 2000	
Caltech, Pasadena, California	ı, USA (summer)	College/Univ	ersity	Research Assistant	1997 - 1997	
Will you be on official leave from	ı your current position, t	o which you will ret	urn?			
⊠ NO ☐ YES						
Program Information						
Number of months for which you			Proposed	Starting Date Month / Day	/ Year	
Tanuna fan Canian annliaanta	12)	August 1,	. 2003		
Tenure for Senior applicants Agency	Laboratory or	NASA Center	_	osed Research Adviser	Research Opportunity Number	
or NASA		GSFC	Michael A		44 30 21 B 0962	
or						
or						
Field of Proposed Research. Re	fer to the Field Refere	ence List.	Coc	de (most appropriate to Re	search Proposal)	
Field Name Planetary Science				de 2173		
References – Professio Enter the names, titles, and precipients, the first name liste	rofessional addresses	of four (4) respon		are familiar with your res	search. For recent doctoral	
Full Name of Respondent		Complete Professio	nal Mailing	Address of Respondent		
1) Stephen Bougher				atory, AOSS Dept, 2455 Ha n, 48109-2143, USA	yward Avenue, University of	
2) Don Hunten					icson, Arizona, 85721, USA	
3) Bill Hubbard Lunar and Planetary Laboratory, University of A			y, University of Arizona, Tu	ucson, Arizona, 85721, USA		
4) Jay Melosh Lunar and Planetary Laboratory, University		y, University of Arizona, Tu	icson, Arizona, 85721, USA			
All Reference Re	•	of Reference) ee Instructions		enclosed <u>with</u> the ap <i>ecklist</i>	plication package.	
Signature of Applicant				Da	ate	
Please also print your name						

Notice to the applicant: By signing above, the applicant affirms that this information is true and complete and may be used by the The National Academies as needed to consider and administer an award. **Only original signatures are valid.**

APPLICATION

continued

This information will not be used or appear in the evaluation process. It is for statistical purposes only and will remain confidential.

	Applicant Last or Family Nam Withers Date of Birth Month / Day / Y			First Name Paul	S	
APPLICANT	October 3, 1975	ear	Place of Birth City, State/Province, Country Tittensor, Great Britain			
	U.S. Social Security Number	Sex	M	arital Status	Race	Ethnicity
	605 - 98 - 1498	Male Female	Single	Married	Caucasian	Not Hispanic or Lati
	Office Phone	1	Home Pho	one		
CONTACT	520 621 1507		520 327	4827		
INFORMATION	Fax		E-mail			
	520 621 4933		withers@	lpl.arizona.edu		
ı						
CDOUGE	Spouse's Last or Family Name			First Name		
SPOUSE	Date of Birth Month / Day / Y	Year Place of Birth C	City, State	e/Province, Countr	у	
Deper	ndent Full Name	Date of Birth Month / Day / Year		City, S	Place of Birth State/Province, Co	untry

APPLICATION continued

OFFICE USE ONLY

Last Name ID

To assist us in making information available to a greater number of potential applicants, it is important for us to learn how you initially heard about The National Academies Research Associateship Programs.

Please	check ONLY one of the following:	
	colleague or fellow graduate student	
	Ph.D. thesis adviser or other professor	
	university placement office	
	former or current National Academies Research Associate	
	Research Adviser or other scientific staff at the federal Laboratory	
	National Academies staff member at professional scientific meeting Title of Meeting	Date of Meeting Month / Year
	Advertisement in professional publication Name of Publication	
	Other Please Specify	
To whic	ch review are you applying?	
	February	
	June	
	October	

THE NATIONAL ACADEMIES Advisers to the Nation on Science, Engineering, and Medicine

Research Associateship Programs

OFF	CE	LISE	ON	I.V

LABORATORY/CENTER REVIEW

THE APPLICANT COMPLETES THIS SECTION.

Applicant Last or Family Nam	e	Firs	t Name			
Withers		Pau	l			
Middle Name		Mai	den Name (if appl	icable)		
Gareth						
Agency	Laboratory	or NASA	Center	R	Research Opporti	unity Number
or NASA		GS	FC	4	44 30 21	В 0962
Proposed Length of Tenure		osed Starting Date		Level		l
Number of Months	Mo	onth / Day / Year			71	
12	A	August 1, 2003		Postdoctoral Senior		l Senior
Title of Research Proposal						
Winds in Planetary Atmos		r				
PROPOSED RESEARCH A	DVISER INFORMATION					
Adviser Name		Adviser Office I	Phone	Adviser E	-mail	
Michael Allison		212 - 678 - 5554		pcmda@	giss.nasa.gov	
Adviser Address			City		State	Zip (Postal) Code
NASA/Goddard Institute fo	or Space Studies					
2880 Broadway			New York		NY	10025

THE PROPOSED RESEARCH ADVISER COMPLETES THIS SECTION.

Please respond to all inquiries even if it is not possible to recommend the Research Proposal for review by The National Academies panels. Attach additional sheets, if necessary. Your critical comments on the scientific content of the proposed research are necessary for the evaluation process.

- 1) Research Adviser (name of person completing this portion of the form)
- 2) To which Division or Branch would the applicant be assigned (within this Agency-Laboratory/Center)? (Entering information electronically expands the field to accommodate all of the space you need.)

LABORATORY/CENTER REVIEW

continued

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Applicant Last or Family Name	First Name
Withers	Paul
3) Discuss the scientific quality of the Research Proposal. Please a approach sound and technically feasible? Does the Research Praccomplished in the proposed timeframe?	
4) How will the proposed research contribute to the mission of the	sponsoring agency?
5) Are the facilities and equipment at the sponsoring laboratory and to obtain equipment not already in place?	lequate to complete the proposed research, or is funding available
6) Other comments that might be useful in the evaluation of this Re-	search Proposal:

LABORATORY/CENTER REVIEW

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ID

continued

Withers	Paul	
PROPOSED	RESEARCH ADVISER'S RECOMMEND	ATION
Recommended for review	Not recommended for review – no Laborato	ry interest.
Signature of Proposed Research Adviser		Date
	, sign, date and forward this form to the Laboratory or Cent	
LABORATORY/CENTE	R PROGRAM REPRESENTATIVE'S REC	COMMENDATION
The Laboratory/Center rec	commends this Research Proposal for review.	
_	commends this Research Proposal for review. es not recommend this Research Proposal for review.	
_	es not recommend this Research Proposal for review.	
The Laboratory/Center do	es not recommend this Research Proposal for review.	
The Laboratory/Center do Laboratory/Center Program Repres	es not recommend this Research Proposal for review. entative's Comments	Date
The Laboratory/Center do Laboratory/Center Program Repres Signature of Laboratory/Center Program	es not recommend this Research Proposal for review.	Date
The Laboratory/Center do Laboratory/Center Program Repres Signature of Laboratory/Center Program	es not recommend this Research Proposal for review. entative's Comments n Representative	Date

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Research Associateship Programs

RESEARCH PROPOSAL

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Applicant Last or Family Name F		First Name		
Withers		Paul		
Middle Name		Maiden Name (if applicable)	
Gareth				
PROPOSED I	RESEARCH A	ADVISER INFOR	MATION	
Proposed Research Adviser	Agency	Laboratory or	NASA Center	
1) Michael Allison	or NA	SA	GSFC	
2)	or			
3)	or			
Title of Research Proposal		·		
Winds in Planetary Atmosphere	Conserve Vint	Code (and an discording	D. J.	
Field of Proposed Research Refer to the Field Re Field Name Planetary Science	terence List.	Code (enter the code)	Code (enter the code most appropriate to your Research Proposal	
Brief Abstract of Research Proposal Enter or attach no more than 100 words.				
Characterization of winds is essential for und challenging to measure. In the initial year-lor develop an innovative technique for measuring data from Venus and Mars. As a member of the Exploration Rovers, I will analyze accelerome temperature, and winds during their entry in	ng period of this Asso g winds using latitudi he Atmosphere Scien ter and gyroscope da	ciateship, I will pursue two nal gradients in density and ce Advisory Team for the La	complementary goals. I will apply it to upper atmospheric anding of NASA's Mars	
Signature of Applicant			Date	

ATTACH DETAILED RESEARCH PROPOSAL

(maximum of 4 pages)

Use additional sheets as necessary, but do not exceed a maximum of 4 pages of no more than 500 words per page.

Please sign and date each page at the bottom.

APPENDIX

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Research Proposal

Applicant Last or Family Name

First Name

Anticipated Research Needs (Indicate special requirements necessary for you to conduct your research.)
(Entering information electronically expands the field to accommodate all of the space you need.)

1) Describe activities related to the acquisition or collection of data, such as field activities, research voyages, or observatory use

Travel to 2 national two day workshops (\$1000 each), 2 national week-long conferences (\$1500), and 1 international week-long conference (\$2500) per year

2) Computer resources

1 Unix workstation (\$3000 or available from Laboratory supplies), 1 laptop computer (\$2500 or available from Laboratory supplies, computer support, and software (\$300)

3) Specialized equipment

4) Other

Books, computer consumables, office supplies, publication and reprint charges, express shipping, Xerox, and long distance charges (\$1000)

Signature of Applicant

Rev. 09/2002

Date

THE NATIONAL ACADEMIES Advisers to the Nation on Science, Engineering, and Medicine

Research Associateship Programs

PREVIOUS AND CURRENT RESEARCH

to be completed by Postdoctoral applicants only

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ID	

Applicant Last or Family Name First Name				
Vithers Paul				
Middle Name	Maiden Name (if applicable)			
Gareth				
Date of Ph.D. Month/Year Thesis Adviser				
May / 2003 Steve Bougher				
Title of Ph.D. Dissertation				
Weather in the Martian Atmosphere - And Other Topics Status of Ph.D. Dissertation				
Published Accepted for publication	In preparation for publication Not to be published			
Brief abstract of Ph.D. Dissertation Enter or attach no more tha	nn 100 words.			
Mars, entry accelerometer data analysis, comparison of martian topo	publication. Density in the martian upper atmosphere varies regularly e quantified this variability, compared it to classical tidal theory, and			
Provide a concise description of all research investigations conduct	ed within the past five years.			
Include a list of publications for the past five years, listed in the following order: 1) refereed journal articles; 2) books; 3) published proceedings; 4) non-refereed articles; and, 5) patents. Citations should include the following: a) authors; b) year of publication; c) full name of journal, d) volume number, and, e) page number(s).				
DO NOT SEND REPRINTS				
See attached pages				
Provide a concise description of the nature of any technical or scientific affiliation that you have had, or continue to have with the Agency for which you are applying. Because one of the objectives of The National Academies Research Associateship programs is to bring new talent and ideas to the federal Laboratories, the information you provide in this section will be used by The National Academies to determine your eligibility for an award. IF NO AFFILIATION, INDICATE "NONE."				
I spent 10 weeks in 2000 at NASA's Goddard Spaceflight Center a I am an Atmosphere Science Advisor for the Landing of NASA's M				
Signature of Applicant	Date			

Use additional sheets as necessary. Do not exceed a maximum of 4 pages , including publications. Please sign and date each page at the bottom.



Research Associateship Programs

PREVIOUS AND CURRENT RESEARCH

to be completed by Senior applicants only

OFFICE	USE	ONLY	
TD			

Applicant Last or Family Name	First Name
Middle Name	Maiden Name (if applicable)
Provide a concise description of all research investigations conduct Include a list of publications for the past five years, listed in the folloproceedings; 4) non-refereed articles; and, 5) patents. Citations sho full name of journal, d) volume number, and, e) page number(s).	owing order: 1) refereed journal articles; 2) books; 3) published
DO NOT SEND REPRINTS	
Provide a concise description of the nature of any technical or scient Agency for which you are applying. Because one of the objectives bring new talent and ideas to the federal Laboratories, the informati Academies to determine your eligibility for an award. IF NO AFFILIATION, INDICATE "NONE."	of The National Academies Research Associateship programs is to
Signature of Applicant	Date

Use additional sheets as necessary. Do not exceed a maximum of 4 pages, including publications. Please sign and date each page at the bottom.



Research Associateship Programs

OFFICE	TICE	ONIT	1 7	

REFERENCE REPORT

E REPORT	ID

Respondent must return the Reference to the applicant -- completed, signed, and in a sealed envelope with the respondent's signature clearly written across the envelope flap.

1	1 8	V		•
Applicant Last or Family Name		First Name		
Field of Proposed Research		Agency	Laboratory or	NASA Center
		0.**		
		or		
Title of Research Proposal				

Applicant: submit a brief abstract of your Research Proposal.

If you are applying to more than one Agency with different Research Proposals, please submit \underline{each} abstract, and identify the Agency to which each refers.

Enter or attach no more than 100 words per abstract.

RESPONDENT'S REPLY

Full Name & Title of Respondent	Institutional Affiliation				
Address	Office Phone	E-mail			
Autress		E-muu			
I have known this applicant in the following capacities (you may	check more than one)				
	ing/research assistant	as my thesis advisee			
as a graduate student as a profes	ssional colleague	by reputation only			
2) I was acquainted with the professional work of this applicant from					
3) I had a poor fair good excellent opportunity to observe the quality of this applicant's work.					
4) The major function of this applicant is/was \square research \square teaching \square administration of research \square other (specify below)					
5) If the applicant is/was a student, how does he/she compare with	students currently in you	r department?			
☐ Lower half ☐ Upper half ☐ Top 25%	□ Top 10% □	Top 1%			

REFERENCE REPORT

continued

OFFICE USE ONLY

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Applicant Last or Family Name	First Name				
6) Please comment on the Applicant's scientific and technical abilities in comparison with other scientists and engineers of similar training and experience. Include in your assessment the following: a) knowledge of the field; b) skill in experimental design; c) technical abilities; d) innovative abilities; e) ability to work independently; f) analytical abilities; and, g) skills in interpreting and reporting research.					
7) Please indicate on this scale, your overall impression of this applic Below Average Good Exce	cant. (Check ONLY one.) ellent Outstanding Inadequate Opportunity to Obse	rve			
RESPONDENT: Your response <u>below</u> is necessary if applicant requests information from the file.					
I ask that the National Academies maintain the confidentiality of my identity to the extent permitted by law. I further ask the National Academies to maintain the confidentiality of these comments to the extent permitted by law.					
I ask that the National Academies maintain the confidentiality of my identity to the extent permitted by law. I do not ask the National Academies to hold my comments in confidence.					
My preparation of this Reference Report is not conditioned on the request that the National Academies hold my identity or comments in confidence.					
Signature of Respondent	Date	_			
Please also print your name					

Respondent must return the Reference <u>to the applicant</u> -- completed, signed, and in a sealed envelope with the respondent's signature clearly written across the envelope flap.