

**2021 Mentor Proposal for the
High Performance Computing Internship Program (HIP)**

HIP-21-
WD Staff Only

Section 1: MANDATORY – ALL FIELDS MUST BE COMPLETED

Proposal Title:

Synopsis:

Mentor's Information:

Organization/Command: Department/Branch:
HPCMP Project No.
(if applicable)

Mentor (Must be government)

Name:
Phone:
Email:

Physical Mailing Address:

Co-Mentor (optional/contractor)

Name:
Phone:
Email:

Physical Mailing Address:

Mentor's Plan:

No. of Interns Planned: Est. Start Date:

Section 2: MANDATORY – ALL FIELDS MUST BE COMPLETED

Financial Point-of-Contact

<p>Name: <input style="width: 100%;" type="text"/> Phone: <input style="width: 100%;" type="text"/> Email: <input style="width: 100%;" type="text"/></p>	<p>Physical Mailing Address: <input style="width: 100%; height: 80px;" type="text"/></p>
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Performing Organization Approving Official

<p>Name: <input style="width: 100%;" type="text"/> Phone: <input style="width: 100%;" type="text"/> Email: <input style="width: 100%;" type="text"/></p>	<p>Physical Mailing Address: <input style="width: 100%; height: 80px;" type="text"/></p>
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Funding Document Addressed to
(if different than Financial POC) :

Special Instructions:

Funding Type:

Note that direct cite MIPRs must be fully expended 30-45 days after the internship has been completed
Interagency Agreement Signatory Contact Information (if different than Approval Official)

Name: <input style="width: 95%;" type="text"/>	Position Title: <input style="width: 95%;" type="text"/>
Phone: <input style="width: 95%;" type="text"/>	Email: <input style="width: 95%;" type="text"/>
Physical Mailing Address: <div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div>	

Proposed Performing Organization's Confirmation of Intent to Accept Funds:

By signing the below, I confirm that the organization is capable of, and intends to, accept the funds for this internship opportunity if awarded. **I further confirm that the organization will take the necessary steps to ensure that funds are either fully expended, or will de-obligate and return any remaining balance to the HPCMP no later than 30 days after the internship is complete.**

Mentor:	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <small>Mentor</small>
Financial POC:	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <small>Financial POC</small>
Approving Official:	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> <small>Approving Official</small>

Section 3:

This section is limited to two (2) pages and MUST contain the following four elements: **Mission Impact, Program Plan, Intern Activities, and Mentor Qualifications.** (See instruction page for more details on specific element content.) Begin each new area with a header for each element (Ex: **Mission Impact**).

6,000 character limit for this page

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2021 DOD HPCMP HPC INTERNSHIP PROGRAM (HIP) PROPOSAL INSTRUCTIONS

Mentors interested in submitting a HIP Proposal should use this form. No other formats will be accepted. Submit a separate proposal for each HIP project. Directions follow for those fields that may require clarification.

Section 1:

Synopsis: This is a brief description of the project that, if awarded, will be used to prepare the Interagency Agreement.

Mentor's Information: Provide the mentor and co-mentor's organization and contact information. Mentor must be a government employee; the co-mentor may be a contractor.

Mentor's Plan:

No. of Interns: Identify the number of interns being proposed to support this effort. All associated costs, contractor fees, or government internship processing fees are either covered in this limit or covered by the organization if the total cost is greater than the funding provided.

Est. Start Date: For planning purposes, provide the best estimate at this point for your intern to start.
Note: The actual start date of your intern will depend on availability and in-processing by the intern vehicle used.

Section 2:

Proposed performing organization's confirmation of intent to accept funds: This section requires signatures of the Mentor, Performing Organization's Approving Official and Financial POCs, confirming that the organization is able to accept and fully expend the funding of this project, if awarded.

Funding document addressed to: Provide the address as it should appear on the MIPR.

Special Instructions: Provide any special instructions that may be useful for the HPCMP financial team in processing a funding document.

Funding Type: Check the box that identifies how funds will be accepted by your organization (direct cite or reimbursable).

Interagency Agreement Signatory: If your organization has a designated signatory for Interagency Agreement forms other than the Approving Official, provide their name and contact information.

Section 3:

This section is limited to two (2) pages and must contain the following four elements. Please begin each new section with the element heading (i.e. **Mission Impact, Program Plan, etc.**).

Element 1: Mission Impact: State clearly the value of the project to the mentor's Service/Agency organization and DoD and indicate if this project will support and possibly impact any specific Service/Agency RDT&E activities (such as Key Mission Priorities or Programs of Record). Also state if this project is related to any of the following HPCMP interest areas: *Hypersonics, Big Data Analytics, Autonomy, Radar/Antenna Modeling, Directed Energy, Missile Defense, Advanced Rotorcraft or Ship Acquisition.*

Element 2: Program Plan: State the overall science and engineering goals of the project and discuss the technical approaches required to accomplish these goals. Identify the appropriate HPC tools and resources to be used. Provide a project plan with clearly defined outcomes and a realistic project schedule.

Element 3: Intern Activities: Show evidence that the proposed work is challenging to the intern. State the relevance of the project to a STEM student's professional goals. Provide detailed plans for professional networking activities, training, and touring the local laboratory/test center specified. Describe how the project will enhance an intern's skills, knowledge, and abilities to improve long-term career opportunities within DoD.

Element 4: Mentor Qualifications: State the mentor's previous experience in intern programs such as HIP. Show there is a reasonable expectation that the mentor has a clear understanding of the roles and responsibilities required to successfully mentor a HIP intern. State how the project will be coordinated with the technical work performed by the mentor and his/her research group. Place this project in the appropriate context of DoD Workforce Development.

The Submission Process: Section 2 **must** have the digital signatures of the Mentor, Performing Organization's Approving Official, and Financial POC before the package can be accepted. When submitting the proposal, use the following file name convention: mentor's last name_org_date (ex: Polsky_NAWCAD_16Sep2021.pdf). Proposals must be submitted by email to the HPCMPO at HIP@hpc.mil.