Biomedical Informatics, Genomics and Translational Cancer Research Training Program (BIG-TCR)

<u>Postdoctoral Fellowship Application Form</u>

<u>Applicant Information</u>

First name:_Middle initial: Last name:

Date of birth (MM/DD/YYYY):

Address (street, city, state, zip code):

Email: Email (permanent):

Phone:_ Current UTHealth school and department:

Current supervisor(s): name, UTHealth Houston school and

department: How many year(s) have you been a postdoctoral fellow?

Have you completed a course in the Responsible Conduct of Research during your postdoctoral training? Yes ☐ No ☐

If Yes, when did you take the course?

Citizenship or Visa: US Citizen / Permanent Resident of the US ☐ Visa ☐ If

Visa, please provide your visa type and expiration date:

Are you currently being supported by other training grants or fellowships?

Yes ☐ No ☐

If yes, please provide the information:

Department administrator (for stipend process purpose):

Administrator's phone number:

Administrator's email:
Additional Applicant Information (Required by the funding agency)

Gender: Female ☐ Male ☐ Other ☐ Prefer not to answer ☐

Race: African American ☐ Alaskan Native/ Native American ☐ Asian ☐ Native Hawaiian/Pacific Islander ☐ White ☐ Other ☐ Prefer not to answer ☐ **Ethnicity:** Latino/Hispanic ☐ Not Latino/Hispanic ☐ Prefer not to answer ☐

Do you have a disability? Yes ☐ No ☐ Prefer not to answer ☐
Prior Research Summary

Publications (published peer-reviewed articles, no more than 10, please specify your name in the author list):

Abstracts (no more than 10, please specify your name in the author list):
<u>Education</u> **(final degree [PhD, MD or equivalent], proof is required)**

Degree	Institution	Major	Date of degree received (month/year)	GPA (with scale)

Reference

Please arrange one reference letter from an external supporter. Recommendation letter should be signed and sent as a PDF file to BIG.TCR@uth.tmc.edu before 23:59 pm, February 10, 2024.

Referee name:

Degree:

Title:

Institution:

Phone:_ Institutional Email:

Mentor Information (one in BIG[*] and the other in TCR[#] area)

Primary mentor information:

Name:

Degree:

Title:

Institute:

Email:

Research field: BIG* ☐ TCR[#] ☐

Co-mentor information:

Name:

Degree:

Title:

Institute:

Email:

Research Field: BIG* ☐ TCR# ☐

BIG*: Biomedical Informatics and Genomics

TCR#: Translational or Basic Cancer Research
Applicant Attestation

I hereby declare that the above information is complete and truthful.

Please sign your name – stamps are not acceptable for this form.

Applicant Signature Date

Mentorship Agreement

I agree to serve as a mentor of this trainee during the CPRIT fellowship if awarded and join the BIG-TCR training program as a mentor (if not a mentor yet).

Primary mentor: I also agree to cover additional cost of this trainee during CPRIT

fellowship. Please sign your name – stamps are not acceptable for this form.

Primary Mentor Signature Date

Co-Mentor Signature Date

Personal Statement: (The statement should discuss your short-term and long-term career goals, your interest in cancer research and your intention to enroll in the courses required by the competency-based BIG-TCR Postdoctoral Training Program, which includes the responsible conduct of research, research proposal writing, workshop, core lab rotation and the BIG-TCR annual retreat. Limited to one page. You may edit this file with Microsoft Word and convert to pdf file before you submit the application).

Research Statement: (The statement should include research title, abstract, specific aims, background and significance, study design and methods, impact and relevance to both the BIG and TCR area, and expected outcomes. Limited to two pages. References can be included with additional pages.)

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Training Plan: (Please describe which parts of the competency will be developed during the fellowship, and how mentors will supervise the trainee. This may include course work, presentation & writing training, computational training workshop, as well as laboratory trainings. Limited to one page.)

Applicant's Checklist for Required Application Materials

All application materials, including *Curriculum Vitae*, academic transcripts, final degree certificate, and letters of recommendation must be sent to BIG.TCR@uth.tmc.edu before **11:59 pm of February 10, 2024**. The selected candidates will be available for interview scheduled on **February 15, 2024**. Detailed procedure will be included in the letter informing the applicant for interview.

☐ Application form includes application information, personal statement, research statement, and training plan.

☐ Applicant's *Curriculum Vitae* (list essential educational and academic records)

☐ Copies of academic transcripts (transcript and degree certificate from Graduate School or Medical School are required, others are optional)

☐ Two Mentors' NIH Biosketch (no more than 5 pages for each mentor)

☐ Recommendation letter from primary mentor

☐ Recommendation letter from co-mentor

☐ One letter of recommendation from an expert outside of UTHealth

☐ Applicant's attestation

☐ Mentorship agreement