



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS



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

Predoctoral Fellowship Application Form

Applicant Information

First name: _____ Middle initial: _____ Last name: _____

Date of birth (MM/DD/YYYY): _____

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

Email: _____ Email (permanent): _____

Phone: _____

Graduate school: _____

Program in graduate school (if available): _____

Current advisor(s): name, UTHealth Houston school and department:

Which year did you enter the graduate school? _____

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

If Yes, when did you take the course? _____

Main milestones you have completed in your doctoral program (e.g. qualification exam)

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):

Education (academic transcript 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 11:59 pm, Monday, October 9, 2023.**

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.

A rectangular box with a black border, intended for the applicant's signature.

Applicant Signature

A rectangular box with a black border, intended for the date.

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.

A rectangular box with a black border, intended for the primary mentor's signature.

Primary Mentor Signature

A rectangular box with a black border, intended for the primary mentor's date.

Date

A rectangular box with a black border, intended for the co-mentor's signature.

Co-Mentor Signature

A rectangular box with a black border, intended for the co-mentor's date.

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 Predoctoral 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 may be included with additional pages.)

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Training Plan: (Please describe which competency-based training courses will be part of 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, and letters of recommendation must be sent to BIG.TCR@uth.tmc.edu before **11:59 pm, Monday, October 9, 2023**. The selected candidates will be available for interview by **October 13, 2023**. 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 (transcripts from Undergraduate and Graduate 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