Gulf Coast Consortia
QUANTITATIVE BIOMEDICAL SCIENCES

Training in Precision Environmental Health Sciences (TPEHS)
Training Program [NIEHS T32 ES027801]
FELLOWSHIP APPLICATION FORM - page 1 of 4
Complete application form entirely. *All fields are REQUIRED. State 'N/A' if not applicable.*

Predoctoral / Postdoctoral Applicant Information

Please download a copy of this form to your desktop first. You may encounter issues if opening the form directly from your browser.

***IMPORTANT, PLEASE READ:** - It is highly recommended that YOU or your PRIMARY MENTOR reach out to the designated TPEHS Steering Committee member at your institution to discuss your background and project prior to completing this application. List of institutional representatives is located at the bottom of this form.

First Name: _____ Middle Initial: ___ Last Name: _____

Birthplace: _____ Citizenship: _____

Birthdate: _____ Gender: _____ Phone Number: _____

Requested Trainee Level of Support: _____

Institutional email: _____

Personal email: _____

Current Address: _____ Current Institution: _____

Department or Graduate Program: _____

Date Started Current Graduate Program or Postdoc: _____ Graduate GPA: _____

Primary Mentor

Name	Department	Institution	Email

Secondary / Co-Mentor(s)

Name	Department	Institution	Email

Testing Information

MCAT (if applicable): _____

GRE General:

Verbal Raw: _____ Quantitative Raw: _____ Analytical Raw: _____

Verbal Percentile: _____ Quantitative Percentile: _____ Analytical Percentile: _____

Education

List all prior institutions where you have earned a degree, beginning with the most recent (prior to your current program).

Institution **#1:** _____ Degree: ___ Degree Date: ___
Field of Study: _____ GPA: ___
Institution **#2:** _____ Degree: ___ Degree Date: ___
Field of Study: _____ GPA: ___
Institution **#3:** _____ Degree: ___ Degree Date: ___
Field of Study: _____ GPA: ___

Predoctoral students: PhD Subject Area: _____

Anticipated Degree Month/Year: _____

Gulf Coast Consortia
QUANTITATIVE BIOMEDICAL SCIENCES

Training in Precision Environmental Health Sciences (TPEHS)
Training Program
Fellowship Application form - page 2 of 4

TPEHS Project Information

Project Title:

For this section, please attach a document to your application package with the following components and email as a single PDF to jessica.poli@rice.edu. All sections MUST be completed!

1. Project Description (max 750 words): Explain the biological problem you are addressing, and the environmental approaches you are using to solve it.

2. Layperson's Project Description (max 250 words): Note, a layperson's description is a simple description that would be understandable by someone with only a basic science background. It is for general purposes only and should describe relevance to human health.

3. Mentoring and Training Plan (max 400 words): Provide a brief description of the plan you and your mentors have jointly developed to achieve your stated career goals. Include what specific skills/ knowledge/ training you will acquire from each mentor during your appointment. Include any anticipated didactic course work, anticipated research training, lab meetings, journal clubs, enrichment activities and personal development (e.g. writing and speaking skills), professional meetings to be attended, etc. The plan should include an estimated timeline for completion of the graduate training program (or postdoctoral fellowship) and specific milestones to be achieved. Again, this plan should be jointly developed by you and your mentors (mentors will confirm this in their Recommendation Letters).

4. Grant Support: List all current and previous grant support (federal or otherwise) supporting your project/stipend, including any previous or current training grant or training fellowship support. Include the project title, grant sponsor, total award amount, and dates of support.

5. Publications: Provide a list of all your peer-reviewed publications, abstracts, patents, patent applications. PMCID numbers must be included, where applicable. The preferred format for manuscript publications is as follows:

> *Halpern SD, Ubel PA, Caplan AL. Solid-organ transplantation in HIV-infected patients. N Engl J Med. 2002 Jul 25;347(4): 284-7.*

6. Brief Individual Development Plan:

Career Plans

| Plan A: *e.g. faculty position* | and | Plan B: *e.g. job in industry* |

Long-term career goal: Long-term career goal:

Short-term goal: Short-term career goal:

List 2-4 of your skills that need improvement

> *Examples: developing/managing budgets, how to interview, networking for job contacts, statistical skills, grant writing, teaching, dealing with conflict, delegating responsibilities, improving oral presentation skills, etc.*

Goals for the 12 months, including those that will improve your skills

> *Include goals listed for the upcoming 12 months, starting with the month after your interview. Include presenting at the Keck Annual Research Conference in October. To save space, do not include attending Keck Seminars and monthly trainee meetings.*

a. Professional and career development workshops you will attend in the next 12 months

> *Examples:*
> *Jan 2022: Workshop on how to improve and use your LinkedIn profile*
> *Mar 2022: Research mentor training*
> *May 2022: Workshop on starting a lab*
> *Sept 2022: Workshop at institution X on developing a grant budget (or interviewing skills, negotiating to minimize conflict, etc.)*
> **List only workshops that actually will be offered the months you name.**

b. Timeline and steps for preparing, writing, and publication of papers on your TPEHS project

> *Example:*
> *May 2022: finish gathering data*
> *June 2022: Test the application of your algorithm, refine the systems*
> *Jul 2022: data analysis*
> *Aug 2022: finish data analysis*
> *Sept 2022: draft figures, abstract, and specific aims*
> *Continue through when you anticipate submitting a manuscript. Include every month from Mar 2020 to Feb 2021 or beyond.*

c. Required grant writing course.

> *This may be a multi-month grantsmanship course at your institution, such as UTH's Grants 101 or Grants 102. (name months it will be offered), or the MD Anderson 1.5 day course (1 day on R01s, 1/5 day on K awards), offered either in Spring or Fall. Estimated completion date of the grant proposal (K01, R21, other; please specify).*

d. Plans for conference presentations on your TPEHS project in the next 12 months

> *List anticipated conference names and dates, and types of presentations: oral, poster, podium, abstracts.*

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QUANTITATIVE BIOMEDICAL SCIENCES

Department Administrator

Name of trainee's department administrator responsible for processing stipend:

Administrator's phone number: | Administrator's email:

Keywords
Provide up to six key words describing your research:

Research Information List all prior research experience and provide the requested information in the appropriate sections below.

Role/Level	PI / Mentor Name	Institution	Dates of research	Total no. of months
Undergraduate				
Undergraduate				
Graduate				
Graduate				
Postdoctorate				
Postdoctorate				

Research Ethics Have you taken a biomedical ethics course in the Responsible Conduct of Research (RCR)?

No. If no, what course do you plan to take and when?

Yes. If yes, please provide name of course, where taken, and when it was completed.

COMPLETED Coursework List the TPEHS-relevant courses you have taken prior to your TPEHS appointment that you would like to count toward your TPEHS curriculum requirements.

Course category	Course name, number, institution	Credit Hours	Semester and Year completed
Genetics			
Environmental Health			
Data Science			
TPEHS Foundations course			

REQUIRED Coursework List the TPEHS-relevant courses you will take during your TPEHS appointment to satisfy the TPEHS curriculum requirements - complete ALL sections.

Course category	Course name, number, institution	Credit Hours	Semester and Year you plan to complete
Genetics			
Environmental Health			
Data Science			
TPEHS Foundations course			

Gulf Coast Consortia
QUANTITATIVE BIOMEDICAL SCIENCES

Training in Precision Environmental Health Sciences (TPEHS)
Training Program
Fellowship Application form - page 4 of 4

Additional Applicant Information (Requested for reporting):

Responses to the following items will help provide statistical information on the participation of individuals from diverse groups in Public Health Service (PHS) programs and identify inequities in terms of recruitment and retention based on race, ethnicity, disability and/or disadvantaged background. **Trainees, scholars, and participants are strongly encouraged to provide this information, however declining to do so will in no way affect the outcome of their application.**

Are you Hispanic (or Latino)? *Note -'Hispanic or Latino' refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino."*

Do you have a disability? *Note - A 'disability' is a physical or mental impairment that substantially limits one or more major life activities, as described in the Americans with Disabilities Act of 1990.*

If so, you may add additional information here, however this field remains entirely OPTIONAL.

Applicant's Signature
Checking this box is considered the equivalent to your signature.

I certify that all of the information submitted in this application is complete and correct to the best of my knowledge, and I waive the right to see recommendation letters submitted on my behalf.

TPEHS Fellowship Application Submission CHECKLIST
Please make sure you have completed all of the following components of this Application for full consideration into the TPEHS fellowship program. Send all application material to the attention of Jessica Poli (**jessica.poli@rice.edu**) in ONE email. **Have you...**
- **Requested your Mentor and Co-Mentor Recommendation Letters?**
  (These letters should be sent directly from the mentors to jessica.poli@rice.edu)
- **Requested Two additional Letters of Recommendation <u>and included the corresponding contact information below?</u>** *(These letters can be from anyone else other than your mentors and should be sent from the recommender to jessica.poli@rice.edu)*
- **Completed the TPEHS fellowship application form (*this PDF*)?**
- **Completed the Project Information document? Is it attached?**
- **Included Transcripts?**
- **Included a current resume (CV)?**
- **Included proof of eligibility (e.g. copy of passport/resident card/birth certificate)?**

TPEHS Steering Committee members - Institutional Representatives
Baylor College of Medicine --- Dr. Richard Finnell, Dr. Rui Chen, or Dr. Dan Gorelick
The University of Texas Health Science Center --- Dr. Craig Hanis

Additional Recommenders' Contact Information:

Name	Department	Institution	Email

Application Completion and Submission Instructions
Please download a copy of this form to your desktop first. You may encounter issues if opening the form directly from your browser (some browsers do NOT support form fields). **Once you have completed the form, you must save a copy by selecting the "PRINT" option and choosing "SAVE AS PDF"** then send it as an attachment to Jessica Poli (**jessica.poli@rice.edu**). Once submitted, you will not be able to make changes.