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TMC Training Program in Antimicrobial Resistance (TPAMR)

For Postdoctoral Trainees: PhD, MD, PharmD, MD/PhD

FELLOWSHIP APPLICATION FORM

due date: **January 31, 2022**

Instructions are highlighted and should be deleted before submitting your application form.

All fields are required, unless noted otherwise. Note N/A if not applicable.

Save this application as a Word file in this format: "Last name TPAMR applic date"

Trainee first, middle, and last/family name:

Gender:

Trainee department and institution:

Date you started your current postdoc position (name of month, date and year):

Current Mentor (lab in which you work), Dept, Institution:

PRIMARY MENTOR for TPAMR: The primary mentor will attend the interview with the applicant. During the appointment period, trainees will meet monthly with their primary mentor.

Name	Department	Institution	Email

CO-MENTOR / SECONDARY MENTORS for TPAMR: Applicants will select 2 co-mentors with complementary expertise. Co-mentors will attend the interview with the applicant. During the appointment period, trainees will meet twice annually with their co-mentors. This multidisciplinary mentorship will foster innovation and encourage trainees to keep an "open mind" approach with important emphasis on translational aspects of their AMR project.

Name	Department	Institution	Email

Academic and Training Background

Postdocs / PhD degree:

Title of doctoral thesis:

Thesis advisor, Dept, Institution:

Clinical Fellows / MD and PharmDs in clinical programs:

Place of Residency (Dates/Dept/Institution)

Current fellowship program (Expected date of graduation):

Current Grant support of trainee's stipend (required):

	Agency and mechanism: e.g. CA R01, GM F32	Total amount of stipend	Dates of support
Current primary source of stipend			
Prior fellowship (F31/32) or training grant support as a postdoc			

Degrees: <i>begin list with doctoral / Master's / then undergraduate.</i>	Institution	Field of study	Date degree received, or anticipated date of receipt (use name of month)	GPA

GRE/MCAT scores (OPTIONAL)	Raw:	Percentile:
GRE Verbal score		
GRE Quantitative score		
GRE Analytical score		
MCAT score		

PROJECT TITLE:

Keywords (up to 6):

PROJECT DESCRIPTION (limit: 750 words – do not exceed word limits or your application will be returned):

Describe the proposed research and how it explicitly connects to antimicrobial resistance research.

(OPTIONAL) Laymen’s project description (limit 250 words):

This information is OPTIONAL for the application, but will be required after appointment.

A description understandable to a general audience (like a newspaper) – will be used in grant progress reports.

MENTORING AND TRAINING PLAN* (limit 400 words): **Special emphasis should be placed on this section.*

In your own words, provide a brief description of the plan you and your mentors have jointly developed to achieve your career goals. Include:

1. research training: what specific skills / knowledge / training will you acquire from each mentor during your appointment; whose lab meetings and journal clubs you will attend; how will the mentors collaborate to train you.

2. personal and career development: specific oral and written communication skills you need to improve, and which workshops / training you will take to improve them (include month/year when they will be taken).

3. presentations: national conferences at which you will present your research (and month/year they will be).

4. estimated timeline for completion of your project and specific milestones to be achieved, including publications from this project.

CAREER GOALS (limit 250 words):

Describe:

1. your short term and long term career goals

2. how your goals relate to this training program

3. the education, training and other career development experiences you will need to achieve your career goals, and how this training program will help you achieve them better / more fully than what you are doing now.

PLANNED CURRICULUM / WORKSHOPS:

1. In one or two sentences, describe your previous academic training that relates to your TPAMR project:

2. In the table below, provide details about the courses/workshops you would like to take during your up to 2-year TPAMR appointment – complete all sections and include a timeline. Include the submission of a career grant.

Course/workshop category	Course name, number, and institution, if applicable	Credit hours, if applicable	Semester and year you plan to take this <i>OR course details, if completed (incl. date and grade received)</i>
Foundations	TPAMR Foundations (offered each Fall)		
Biostatistics			
Grant writing			
Rigor & Reproducibility workshop	Offered Spring and Fall		

Responsible Conduct of Research			
Submission of career grant			
Pharmacokinetics/ Pharmacodynamics courses (optional)			
Clinical Research rotation in Columbia (optional)			Interested? Yes or Not at this Time
Planned Conferences			
Other (optional)			

Brief Individual Development Plan (IDP)

Career plans:

Plan A: *e.g. faculty position*

Long-term career goal:

Short-term goal:

Plan B: *e.g. job in industry*

Long-term career goal:

Short-term goal:

(OPTIONAL) Skills

This information is OPTIONAL for the application, but will be required after appointment

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.

- 1.
- 2.
- 3.
- 4.

(OPTIONAL) Goals

This information is OPTIONAL for the application, but will be required after appointment

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 in your goals.

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

Examples:

Sept 2020 Workshop on how to improve and use your LinkedIn profile

Dec 2020 Research mentor training

Feb 2021 Workshop on starting a lab

June 2021 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.

2. Timeline and steps for preparing, writing, and publication of papers on your TPAMR project

Example:

Nov 2020: finish gathering data

Dec 2020: Test the application of your algorithm, refine the systems

Jan 2021: data analysis

Feb 2021: finish data analysis

Mar 2021: draft figures, abstract, and specific aims

Continue through when you anticipate submitting a manuscript. Include every month from July 2021 to June 2022 or beyond.

3. 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):

4. Plans for conference presentations on your TPAMR project in the next 12 months

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

Trainee information:

Start date, if other than October 1, 2021:

Citizenship: delete the non-applicable ones

US Citizen / Dual Citizen / Permanent Resident with a Green Card

Ethnicity (required for reporting): choose as many as are applicable from: African-American, Asian, Caucasian (including Middle East), Native American, Native Alaskan, Pacific Islander (Native Hawaiian, Samoan)

Work email (required):

Personal email (e.g. gmail – required):

Birthdate (name the month):

Local home address:

City, state, zip code:

Address valid until:

Work phone (required):

Cell phone (required):

Department administrator (required):

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

Administrator's phone number (required):

Administrator's email (required):