



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS



**Biomedical Informatics, Genomics and Translational Cancer Research
Training Program (BIG-TCR)
Predocutorial 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
predocutorial 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, September 30, 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 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.

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 of October 7, 2024**. The selected candidates will be notified of their interview schedule in **5 to 10 business days following the submission deadline**.

- 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)
- NIH Biosketches of the two Mentors (max. 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