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| UF Shands Cancer Center – Cancer Connection eNews | **Team-based Interdisciplinary Cancer Research Training Program** |  |
|  | **Team Application**  **APPLICATION DEADLINE:**  **May 2, 2023 at 11:59 PM** |

**APPLICATION INSTRUCTIONS**

Please complete this application form in its entirety, save as a pdf and email all your application files (including the mentors’ letter of support, and the mentor and trainee biosketches) to: [education@cancer.ufl.edu](mailto:education@cancer.ufl.edu).

**PART 1: APPLICANT INFORMATION**

List applicants in alphabetical order by last name.

**Applicant A:**

* Contact Information
* Demographic Information
* Academic/Training Information. Complete this section according to your current academic training category.

**Applicant B:**

* Contact Information
* Demographic Information
* Academic/Training Information. Complete this section according to your current academic training category.

**PART 2: TEAM RESEARCH PLAN**

This section should be written by both student applicants, working together as a team. Mentors should review the application and provide feedback before submission, and before writing the Team Mentoring Plan (Part 3).

Font size must be 11 or 12. Arial is the preferred font. Do not exceed 4 pages for this section.

1. **Team Statement** *(max 1 page)*
2. Provide a brief summary of each trainee’s individual research projects.
3. Common research interest or question that brings your team together.
4. Rationale that supports the need for the collaboration.
5. How your backgrounds and/or experiences are complementary.

**B. Research Training Plan**

1. Team Specific Aim(s) *(max 1 page)*
   1. Hypothesis that forms the basis of your collaborative research.
   2. Identify the clinical and/or translational components of your research plan.
   3. State concisely the goals of the proposed collaborative research and summarize the expected outcome(s).
   4. List succinctly the specific objectives of the research proposed (*e.g.*, to test a stated hypothesis, create a novel design, solve a specific problem, challenge an existing paradigm or clinical practice, address a critical barrier to progress in the field, or develop new technology).
   5. How will each team member contribute to the collaboration?
2. Research Strategy for and Significance of Team Specific Aims *(max 2 pages)*
   1. Approach: Briefly describe the overall strategy, methodology, and analyses to be used to accomplish the team specific aims.
   2. Significance: Briefly discuss any of the following that may apply to your project (you do not have to address all of them).

* Importance of the problem or critical barrier to progress that your collaboration addresses.
* How the proposed collaboration will improve scientific knowledge, technical capability, and/or clinical practice in one or more broad fields.
* How much interdependence is required between team members to accomplish your team aims?
* Discuss the synergy between individual projects. How will your results be greater than the sum of the individual parts? How will your results be different than if you were working independently?
* How will the collaboration impact your individual dissertation research projects?
* What impact will the results of collaboration have on the different research field(s) involved?

1. IRB and/or IACUC: Identify any IRB or IACUC protocols relevant to your team specific aims, and/or plans for future protocol submission.

Citations: You may include citations for Part 2, but no more than one page. This page does not count toward the page limits.

**PART 3: TEAM MENTORING PLAN**

Please provide one combined letter of support, written and signed by both T32 mentors. Please address the following in your letter of support.

* Willingness to co-mentor the team
* Relevance of proposed research to basic, clinical and/or translational science
* Planned frequency and type of contact with team members
* Understanding and support of the requirements of the program

**PART 4: BIOSKETCHES**

A. For each trainee, please attach an NIH-format Fellowship Biosketch (see links below). Do not exceed 5 pages for each biosketch.

* [Fellowship Biosketch](http://grants.nih.gov/grants/forms/biosketch-blank-fellowship-format-rev-12-2020-exp-02-28-2023.docx) (blank format page, Word)
* [Instructions for Biographical Sketch](http://grants.nih.gov/grants/forms/application-guide-biosketch-instructions-rev-12-2020.docx)
* [Predoctoral Fellowship biosketch sample](http://grants.nih.gov/grants/forms/predoctoral-fellowship-biosketch-sample-2021.docx) (Word)
* [Postdoctoral Fellowship biosketch sample](http://grants.nih.gov/grants/forms/postdoctoral-fellowship-biosketch-sample-2021.docx) (Word)
* [FAQs](https://grants.nih.gov/grants/policy/faq_biosketches.htm)

1. For each faculty mentor, please attach a current NIH Biosketch that includes current and pending funding. Do not exceed 5 pages for each biosketch.

* [Mentor Biosketch](https://grants.nih.gov/grants/forms/biosketch-blank-format-rev-12-2020-exp-02-28-2023.docx) (blank format page, Word)

C. For each faculty mentor, please attach a list of current and past pre- and postdoctoral trainees (past 5 years), including dissertation topic/research project and current position.

If you have any questions about the TICaRT Program application requirements, please email [education@cancer.ufl.edu](mailto:education@cancer.ufl.edu).

**UF TICaRT Program Application Scoring**

Categories: Team Research Plan

Team Mentoring Plan

Overall Score

Each category will be scored according to the following NIH criteria (1-9).

|  |  |  |  |
| --- | --- | --- | --- |
| **Score** | **Impact** | **Descriptor** | **Additional Guidance on Strengths/Weaknesses** |
| **1** | High | Exceptional | Exceptionally strong with essentially no weaknesses |
| **2** | Outstanding | Extremely strong with negligible weaknesses |
| **3** | Excellent | Very strong with only some minor weaknesses |
| **4** | Moderate | Very Good | Strong but with numerous minor weaknesses |
| **5** | Good | Strong but with at least one moderate weakness |
| **6** | Satisfactory | Some strengths but also some moderate weaknesses |
| **7** | Low | Fair | Some strengths but with at least one major weakness |
| **8** | Marginal | A few strengths and a few major weaknesses |
| **9** | Poor | Very few strengths and numerous major weaknesses |

Minor weakness: An easily addressable weakness that does not substantially lessen impact.

Moderate weakness: A weakness that lessens impact.

Major weakness: A weakness that severely limits impact.

**PART 1: APPLICANT INFORMATION**

**APPLICANT A**

**CONTACT INFORMATION\***

|  |  |  |  |
| --- | --- | --- | --- |
| First |  | Last |  |
| Campus Address: |  | Preferred Phone: |  |
| E-mail Address: |  | UFID: |  |
| Graduate Program: |  | Major/Concentration: |  |
| College: |  | Department: |  |

**DEMOGRAPHIC INFORMATION1**

|  |  |  |
| --- | --- | --- |
| Gender\*  Male  Female  Other  Prefer Not to Disclose | Ethnicity\*  Hispanic or Latino  Non-Hispanic or Latino | Race\* (check all that apply)   American Indian or Alaska Native   Asian   Black or African American   Native Hawaiian or Other Pacific Islander   White   Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Citizenship Status\* | U.S. Citizen | Permanent Resident  Country of Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1Demographic information is reported to the NIH in aggregate, without personal identifiers.

**ACADEMIC/TRAINING INFORMATION\***

**Individual Research Project Title:**

**Primary T32 Mentor**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Title: |  |
| Department: |  | Division: |  |
| Phone: |  | E-mail: |  |
| List any other mentors, if relevant to your project. | |  | |

**Complete the appropriate section below according to your current academic training category.**

**Academic Category 1: Predoctoral Trainee**

|  |  |  |  |
| --- | --- | --- | --- |
| Graduate Program: |  | Major/Concentration: |  |
| College: |  | Department: |  |

**Academic Category 2: Postdoctoral Trainee**

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Department: |  |

**Academic Category 3: Resident or Clinical Fellow**

|  |  |  |  |
| --- | --- | --- | --- |
| Training Program: |  | Program Director: |  |
| College: |  | Department: |  |

**APPLICANT B**

**CONTACT INFORMATION\***

|  |  |  |  |
| --- | --- | --- | --- |
| First |  | Last |  |
| Campus Address: |  | Preferred Phone: |  |
| E-mail Address: |  | UFID: |  |
| Graduate Program: |  | Major/Concentration: |  |
| College: |  | Department: |  |

**DEMOGRAPHIC INFORMATION1**

|  |  |  |
| --- | --- | --- |
| Gender\*  Male  Female  Other  Prefer Not to Disclose | Ethnicity\*  Hispanic or Latino  Non-Hispanic or Latino | Race\* (check all that apply)   American Indian or Alaska Native   Asian   Black or African American   Native Hawaiian or Other Pacific Islander   White   Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Citizenship Status\* | U.S. Citizen | Permanent Resident  Country of Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1Demographic information is reported to the NIH in aggregate, without personal identifiers.

**ACADEMIC/TRAINING INFORMATION\***

**Individual Research Project Title:**

**Primary T32 Mentor**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Title: |  |
| Department: |  | Division: |  |
| Phone: |  | E-mail: |  |
| List any other mentors, if relevant to your project. | |  | |

**Complete the appropriate section below according to your current academic training category.**

**Academic Category 1: Predoctoral Trainee**

|  |  |  |  |
| --- | --- | --- | --- |
| Graduate Program: |  | Major/Concentration: |  |
| College: |  | Department: |  |

**Academic Category 2: Postdoctoral Trainee**

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Department: |  |

**Academic Category 3: Resident or Clinical Fellow**

|  |  |  |  |
| --- | --- | --- | --- |
| Training Program: |  | Program Director: |  |
| College: |  | Department: |  |

**PART 2: TEAM RESEARCH PLAN**

**A. TEAM STATEMENT** *(max. 1 page)*

**Team Research Project Title:**

**Signatures:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(NAME OF APPLICANT A) (NAME OF APPLICANT B)

**B. RESEARCH TRAINING PLAN**

**SPECIFIC AIMS** *(max. 1 page)*

**RESEARCH STRATEGY** *(max. 2 pages)*