Please note that the TCRC is a **non-degree granting** curriculum. The goal of the courses is to provide you with concepts that will help you work across disciplines and participate in translational research. While some of the courses may not seem relevant to your work now, the goal is to give you a working knowledge and vocabulary you can use to interpret the literature, and communicate with mentors, collaborators and team members in different fields. These individuals may inform your research or take your research results and extend them into their fields.

Complete this application to get access to TCRC courses described below. If you want to audit any other courses at UNC, you will need to contact the course instructor directly.

Do not complete this application if:

* you have been accepted into the MSCR degree program. You will register through Connect Carolina per instructions given by the registrar in Epidemiology.
* you are a KL2 or BIRCWH Scholar. Your application to take courses is the K application.

Please contact Susan Pusek at suspusek@med.unc.edu with any questions.

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| --- | --- | --- |
| **Last Name:**  | **First Name:** | **Middle Name:** |
| UNC onyen:If you are new to UNC and do not have an onyen at the time you are completing this, note that we will need the onyen to add you to Sakai, which is the website for course materials. Please forward your onyen as soon as possible.  |  |
| Degrees**:** |  |
| Email address:  |  |
| Primary Discipline: |  |
| Research Interest (if you do not know yet, please say “unknown”) |  |
| Applicant’s Department:Division: |  |

|  |  |
| --- | --- |
| Name of sponsoring program (e.g. T32 in Obesity, department supported, etc.): |  |
| Program start date: |  |
| Program Director Name: |  |
| Program Director email: |  |
| Primary mentor name(s):Name up to 2 mentors. If you are not certain who your mentors will be yet, please say “unknown.” |  |
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**Note that Program Directors may not be the same as mentors.**  Program Directors are responsible for making sure you have sufficient protected time to attend fully participate in the TCRC (including attending and contributing to courses), you have financial support in terms of your salary, and you have mentoring, research support, office space, and equipment to achieve your research goals. Program Directors should inform you of specific requirements of your training program and what coursework and research products are necessary to successfully complete the program.

Mentors are responsible for direct guidance and oversight of your development as a researcher. Mentors will be asked to attend classes at which you are presenting your work and to participate in the review of work by other trainees in this program. If you have not identified a mentor at this time please note “pending” in the section above. **Do not list your program director as mentor unless you have discussed that this person will fulfill both roles and the program director should be contacted to attend classes at which you are presenting your work.**

**Research experience: Please mark X next to the one category that best describes your research experience to date and complete the information requested.**

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|  | A team member on a research team as a trainee (medical student, resident, graduate student, postdoc, other). You had a certain role (data collection, subject recruitment, lab, etc.) on the team for a period of time and may or may not have worked on the project from beginning to end. Trainee stage when participated: |
|  | A team member on a research team as co-investigator or methodologist. You contributed to development and implementation of the research but were not the principal investigator.Role on team:  |
|  | Initiated/designed and conducted a research project without a larger research team. (Do not include dissertation work.) Please describe the final product(s): |
|  | Led a research team as principal investigator. Please describe the final product(s): |

|  |  |
| --- | --- |
| **Have you:** | Yes/No |
| Submitted a grant proposal for funding as principal investigator, either internal (e.g. pilot award) or external? |  |
| Been funded for a grant proposal you submitted as principal investigator, either internal or external?  |  |
| Presented your work at a national meeting, either a talk or poster session? |  |
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| **Check the courses you are requesting for the next academic year.** ***Note: class start and end dates follow the UNC Academic Calendar:*** [***http://regweb.unc.edu/calendars/academic\_cal08-10.php***](http://regweb.unc.edu/calendars/academic_cal08-10.php)**For 2016, classes begin Tuesday August 23, 2016****Biostatistics:** ***PUBH 741 Biostatistics for Healthcare Professionals (the 2 semester sequence of PUBH 741 and 742 is required):******\_\_\_\_Section 1 (Instructor: Joanne Garrett): July 6-August 17, 2016 on Mon/Wed/Fri 12-4 p.m.*** ***OR******\_\_\_\_Section 2 (Instructor: Kim Faurot): Tues/Thurs 11-1:45 p.m. Begins Tuesday August 23, 2016******\_\_\_\_PUBH 742- Spring 2017 for any student successfully completing either section of PUBH 741:*** ***(Instructor: Joanne Garrett): Thursday 12-2 p.m. and Friday 10-12 p.m.*** ***Epidemiology:******\_\_\_\_\_EPID 711 Clinical Measurement/Evaluation: Tues/Thurs 9:30-10:45 a.m. Begins Tuesday August 23, 2016******Grant proposal writing:*** ***\_\_\_\_\_EPID 805 and 806 (the 2 semester sequence is required): Friday 2:30-4:20 p.m.*** This course includes both lectures on basic concepts of grant preparation and study design. And small group work in which participants work on their individual grants. By the end of the first semester participants will finalize specific aims and then prepare the rest of the grant proposal in semester 2. By the end of semester 2 participants will have a mock review of their finished proposal. Identify grant to be submitted (sponsor, type) and target submission date: ***\_\_\_\_R Writing Group: schedule based on participants and faculty****.* This writing group is for individuals who are preparing their first R-type submissions, or who have submitted a R-type award and not been funded. Equivalent grants offered by foundation sponsors or grants other than R01s (e.g. R21, R34) are appropriate. \*\*\*Note this is a writing group, not a didactic course. There are four 30-minute sessions during which program faculty provide written and verbal feedback on the participant’s specific aims, significance/innovation and approach sections. The draft grants then go on to mock study section reviews approximately 2 months before target grant submission. Identify grant to be submitted (sponsor, type) and target submission date: ***Professional Development Skills:******\_\_\_\_Seminar in Professional Development Skills for Clinical/Translational Researchers: Friday 12-2 p.m.*** Participants will be divided into 2 tracks based on their research experience and goals for the year. Sessions will cover topics appropriate for participant’s level of research experience, stated goals for the year and desired career path. There will also be joint sessions with both groups. Example topics include: grant writing skills including internal pilots and NIH, career planning, research project implementation, communication, campus resources, time management, and informatics.  |
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**Training Goals:**

Please complete the following table about your short and long term goals. If you have completed an Individual Development Plan as part of participation in a T32 grant you may substitute that document.

\*\*This section will guide the faculty as they plan the exact curriculum and speakers for the professional development seminar. It is important for us to know in as much detail as possible what you want to achieve during your training period and what your questions and obstacles are. Please be honest!

Overall length of time you anticipate participating in this program (for example, 2 years in a T32, 1 year as part of postdoc, unknown/depends, etc.):

Specific skills you want to achieve in next academic year and what you consider a “success”:

Long term career plans:

**Please attach to this application:**

1. Applicant CV
2. Applicant NIH biosketch
3. Mentor(s) NIH biosketch – if you do not have mentors yet DO NOT include Biosketch of your Program Director for this section
4. Signed candidate/mentor agreement (page 4 of this application).

*Registration for 2016 courses accepted through* ***7/1/2016. Applications coming after 7/1/2016 will be reviewed on a case by case basis to determine if there is space in requested course(s).***

**CANDIDATE/MENTOR AGREEMENT**

Having mentors is a critical element that allows researchers in training to become leaders and independent clinical researchers. Mentors should serve as advisors, experiential teachers and career role models.

1. Mentors have primary responsibility for guiding the mentee toward research independence, by providing the mentee with the scientific and methodological expertise for their research project.
2. Mentors are responsible for insuring that the mentee has adequate time to participate fully in the TCRC curriculum and that the mentee is making progress in their research. This may require meeting with the mentee’s’s Program Director.
3. Regular and frequent meetings are essential for success. Mentors agree to routine meetings to advise and support the mentee’s work.
4. Mentors agree to attend class meetings at which the mentee is presenting, and to provide one in-person peer review for one other trainee in EPID 896 or 805-606; a commitment of approximately 5 hours during 1 year.

The applicant has protected time for research and research training activities. This time is funded using the following source(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Mentor’s signature)   date\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Secondary mentor’s signature)   date\_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Applicant’s signature)   date\_\_\_\_/\_\_\_\_/\_\_\_\_

**APPLICANT AGREEMENT**

I understand and agree to attendance and full participation in all of the courses for which I am enrolled, whether taken for graduate credit or audit. I understand that failure to attend and participate fully may lead to my dismissal from the program.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Applicant’s signature) date\_\_\_/\_\_\_\_/\_\_\_\_

**PROGRAM DIRECTOR AGREEMENT**

As the applicant’s Program Director, I agree to :

1. Guarantee financial support for \_\_\_\_\_ years.
2. Protected research time for the applicant including ability to attend and fully participate in scheduled courses.
3. Office space and equipment sufficient for research goals.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Program Director’s signature) date\_\_\_\_/\_\_\_/\_\_\_\_