

T32 UCLA INTERCAMPUS MEDICAL GENETICS TRAINING PROGRAM GUIDELINES FOR NOMINATION FOR POSTDOCTORAL TRAINING

ELIGIBILITY

Nominees for postdoctoral positions must have an M.D., Ph.D., or equivalent doctoral degree, and must be sponsored by an approved UCLA faculty mentor. Applicants will be considered based on their potential for creative research accomplishments and the relevance and strength of the training program in Medical Genetics. **Trainees must be U.S. citizens or permanent residents.**

PERIOD OF SUPPORT

Appointments will be made for one year from July 1 to June 30 with the possibility of renewal for the following year. Trainees who have received one year of support and who desire support for an additional year must submit a new application. No individual fellow may receive more than three years of aggregate NRSA support at the postdoctoral level, including any combination of NRSA support from institutional and individual awards. **A trainee's appointment is contingent upon their mentor's commitment to providing supplemental funding.**

PROCEDURE

The T32 UCLA Intercampus Medical Genetics Training Program seeks applicants with research interests in areas of genomic medicine, including pathophysiology, molecular mechanisms, phenotyping, and therapy for genetic diseases. If you have a strong postdoctoral candidate for an academic career in these areas for whom you are requesting support on the Training Grant, please provide the following:

1. The application, attached or available at <https://intercampus.genetics.ucla.edu/node/23>. All fields must be completed.
2. The applicant's curriculum vitae (CV) that must include: (a) Education, (b) Postdoctoral Training and (c) Publications (attach a copy of most relevant trainee publication). Include a section detailing past, submitted, and current grant/award funding sources of support for the applicant for the past three years, if any.
3. Two letters of recommendation, one of which must be from the preceptor/research mentor.
4. The preceptor's curriculum vitae or NIH biographical sketch, not to exceed five pages.

Incomplete or unsigned applications will not be reviewed.

Submit the completed application materials as a single PDF file (using the following naming convention: Applicant First Name Last Name_Mentor Last Name_MGT32Post_Application.pdf) with your preceptor copied to:

Issa Lutfi (ilutfi@mednet.ucla.edu) and Jerome Keh (jkeh@mednet.ucla.edu).

**T32 UCLA INTERCAMPUS MEDICAL GENETICS TRAINING PROGRAM
APPLICATION FOR POSTDOCTORAL TRAINING**

1. TITLE OF RESEARCH PROJECT: _____
2. APPLICANT'S NAME (last, first, middle): _____

ADDRESS (street, city, state, zip): _____

HOME PHONE: _____ WORK PHONE: _____ E-MAIL: _____

UCLA UID: _____ ERA COMMONS ID: _____

SSN #: XXX-XX-_____

DATE OF BIRTH (mm/dd/yy): _____

CITIZENSHIP: ☐ U.S. ☐ PERMANENT RESIDENT (attach copy of permanent resident card, to be notarized at appointment stage)
3. CURRENT POSTDOC LEVEL: _____ CURRENT NIH LEVEL: _____

NUMBER OF MONTHS AS A POSTDOC: _____ POSTDOC START DATE: _____
4. MEDICAL LICENSURE STATES, if applicable: _____

FOREIGN MEDICAL GRADUATES ECFMG #: _____ DATE: _____ (attach copy of ECFMG certificate)
5. ARE YOU PRESENTLY COVERED BY MEDICAL INSURANCE: ☐ YES ☐ NO

IF YES, NAME CARRIER: _____
6. HAVE YOU PREVIOUSLY BEEN FUNDED BY AN NRSA INSTITUTIONAL/INDIVIDUAL TRAINING GRANT: ☐ YES ☐ NO

IF YES, HOW MANY YEARS TOTAL? _____ (applicants cannot be supported for more than three years as a postdoc, and five years as a predoc)

GRANT NUMBER: _____ GRANT NAME: _____ DATES: _____
7. PROPOSED PRECEPTOR: _____ DEPARTMENT: _____

CAMPUS ADDRESS: _____ MAIL CODE: _____

PHONE: _____ FAX: _____ E-MAIL: _____

DEPARTMENT HR CONTACT NAME AND E-MAIL: _____

DEPARTMENT FUND MANAGER NAME AND E-MAIL: _____

8. APPLICANT - Provide a description of your career goals:

9a. PROGRAM - Describe in detail the research program to be undertaken by the applicant during the period of training; this must be signed by preceptor and trainee:

Preceptor

Date

Applicant

Date

9b. PROGRAM - Relevance of training to the field of T32 UCLA Intercampus Medical Genetics Training Program:

10a. PRECEPTOR - Brief description of the overall research program in the proposed preceptor's laboratory:

10b. PRECEPTOR – List all predoctoral and postdoctoral trainees currently in the preceptor's laboratory and their sources of funding:

11. CLEARANCES - If this application is approved, an approval application for patient-related studies must also be submitted to the appropriate university committee. Appropriate committee approvals must be obtained for study prior to funds being awarded. The title and identifying data for the study must be identical. Funds will not be allocated until the appropriate forms have been received by the T32 UCLA Inter-campus Medical Genetics Training Program:

A. With respect to the Human Subjects Protection Committee (check one):

- ☐ Approved (attach IRB Protocol Letter)
- ☐ Submitted to the Human Subject Protection Committee on _____
- ☐ No human subjects or human materials will be used in this study
- ☐ Human Subject Protection Committee approval was specifically waived (attach exemption letter)
- ☐ Other: _____

B. With respect the Animal Research Committee (check one):

- ☐ Approved (attach IRB Protocol Letter)
- ☐ Submitted to the Animal Research Committee on _____
- ☐ No animal subjects or animal materials will be used in this study

C. Recombinant DNA/Infectious Agents approval, if applicable (check one):

- ☐ Approved (attach Biosafety Committee approval)
- ☐ Submitted for DNA Committee approval on _____
- ☐ No recombinant DNA/infectious agent research is involved

D. Human embryonic or induced pluripotent stem cells ESCRO approval, if applicable (check one):

- ☐ Approved (attach ESCRO approval)
- ☐ Submitted for ESCRO approval on _____
- ☐ No human embryonic or induced pluripotent stem cells research is involved

Preceptor

Date

Applicant

Date