



2025-2026 ICTR TL1 Predoctoral Trainee Application

First Name:

Middle Name/Initial:

Last Name:

Research Project Title:

UW Student ID #:

Preferred Phone #:

Email Address:

College/Department:

Major/Concentration:

Graduate Program:

Other Professional Degree (if applicable):

ORCID ID #:

eRA Commons Name:

APPLICATION INFORMATION

Application Narrative

Part I. Statement of research problem and significance (1-page limit)

- Project Title
- Statement of overall research problem, and evidence for the human health significance of the problem.
- Research aims, with associated hypotheses.
- Summarize expected outcomes, including the impact the proposed project will have on the research field(s).

Part II. Applicant career goals statement (1-page limit)

- State your long-term career goals, including expected future academic/clinical/industrial positions.
- Explain how you will benefit from the ICTR TL1 program and **how its curriculum and training opportunities will contribute to your career** in interdisciplinary clinical and translational research.
- Describe any previous experience or training with translational science/research. Highlight any research outcomes (new knowledge, publications) and lessons learned.

Part III. Describe the proposed training and mentorship plans (1-page limit)

- Outline the proposed training plan during your time in the TL1 program. List planned courses, workshops, independent studies, conferences, lab meetings. Link these trainings to the expected outcomes of each (e.g., specific knowledge, presentation, publication) and to your proposed research aims. You may use a table format or an IDP form to summarize this information.
- Briefly outline your mentor's qualifications and relationship to your proposed research. List the frequency and type of meetings (individual, lab group meetings) you will hold with your mentor to receive feedback and coaching.

Part IV. Translational relevance and impact on health equity (1-page limit)

- Describe how your proposed research may produce discoveries that are simultaneously important for your discipline(s) AND contribute to other disciplines, thus intentionally advancing the translational process as a whole. For example, as you conduct your research you might develop a new biostatistical



or informatics method; define a new disease-agnostic imaging method; formulate novel recruitment techniques; or establish platforms for community outreach.

- Describe how your proposed research could be developed to reduce health disparities.

Part V. Current NIH biosketch

MENTOR INFORMATION (To be completed by the dissertation mentor(s))

TL1 Mentor #1

Name: _____ Title: _____
Department: _____ Division: _____
Email Address: _____ Phone: _____

TL1 Mentor #2 (If applicable)

Name: _____ Title: _____
Department: _____ Division: _____
Email Address: _____ Phone: _____

Part I. Statement of mentor qualifications (1-page limit)

- Describe your mentoring experiences and qualifications and how these align with the TL1 applicant's proposed research and career trajectory.
- **Formal mentor training (e.g., ICTR-NRMN, T32, UMN asynchronous) is now required for all TL1 mentors.** Describe your formal mentor training including date (year), program (e.g., T32, ICTR, etc), mode (in person/virtual; synchronous/asynchronous). If you (proposed TL1 mentor) have not participated in formal training, please contact the TL1 program for options; you will need to obtain mentor training and provide verification before the applicant is appointed to the TL1 program.
- Include a current NIH biosketch.
- Description of the proposed funding plan for the trainee to complete their graduate degree program following the TL1 appointment.

TRAINEE DEMOGRAPHIC INFORMATION: (reported to NIH in aggregate)

Citizenship Status:

- US-born citizen
- Acquired US citizenship
- Non-US citizen with permanent residency
- Non-US citizen, temporary visa
- Country of citizenship: _____

Hispanic/Latino Origin (Yes/No):

- Cuban Puerto Rican
- Chicano/Other Hispanic-Latino Mexican/Mexican-American



Racial Background (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> African American or Black | <input type="checkbox"/> Native Hawaiian or Other Pacific Island |
| <input type="checkbox"/> American Indian or Alaskan Native | <input type="checkbox"/> Laotian |
| <input type="checkbox"/> Cambodian | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Hmong | <input type="checkbox"/> White |
| <input type="checkbox"/> Other: please specify _____ | |

Which of these descriptors best represents your gender identity:

- | | |
|---|--|
| <input type="checkbox"/> Female | <input type="checkbox"/> Male |
| <input type="checkbox"/> Nonbinary/gender nonconforming | <input type="checkbox"/> Identity not listed |
| <input type="checkbox"/> Prefer not to answer | |

Do you identify as a person who is Transgender:

- Yes
- No
- Prefer not to answer

Which of these descriptors best represents your sexual orientation?

- Heterosexual/straight
- Homosexual (lesbian/gay)
- Bisexual
- Identity not listed
- Prefer not to answer

The Americans with Disabilities Act of 1990 defines an individual disability as: a physical or mental impairment that substantially limits one or more major life activities; a record of such an impairment; or being regarded as having such an impairment. Major life activities include but are not limited to: caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. A major life activity also includes the operation of a major bodily function, including but not limited to functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions. An individual meets the requirement of "being regarded as having such an impairment" if the individual establishes that he or she has been discriminated against because of an actual or perceived physical or mental impairment, whether or not the impairment limits or is perceived to limit a major life activity. This definition does not apply to impairments that are transitory and minor. A transitory impairment is an impairment with an actual or expected duration of 6 months or less.

Do you identify as a person with a disability?

- Yes
- No



- Prefer not to answer

Are you a first-generation college student:

- Yes
- No
- Highest degree earned by any parent/legal guardian:

Check any or all of the following that apply to you:

- Were or currently are homeless according to McKinney-Vento Homeless Assistance Act
- Were ever in the foster care system, as defined by the Administration for Children and Families
- Were eligible for the Federal Free and Reduced Lunch Program for two or more years (WiscAMP)
- Were eligible for Federal Pell grants
- Received support from the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) as a parent or child
- Grew up in either of the following areas:
- A Centers for Medicare and Medicaid Services-designated Low-Income and Health Professional Shortage Areas (<https://data.hrsa.gov/tools/rural-health>)
 - A U.S. rural area, as designated by the Health Resources and Services Administration Rural Health Grants Eligibility Analyzer (<https://www.qhpcertification.cms.gov/s/LowIncomeandHPSAZipCodeListingPY2020.xlsx?v=1>)

APPLICATION SUBMISSION:

Submit all application components (Application, Mentor, and Demographic Information materials; Applicant and Mentor NIH biosketches) as a single document (Word or pdf) to Peggy Hatfield, pmhatfie@wisc.edu **by 5 pm on or before March 14, 2025.**

VIDEO SUBMISSION:

Following submission of the TL1 predoctoral application materials, applicants will receive instructions to record and submit a 5-minute video in response to a specified set of questions.

Please contact Peggy with any questions regarding completion of the application or the video.