Training Program in the Biology of Aging and Lung Disease

T32 Fellowship Application Procedure

1. Eligibility requirements (as per NIH policy):

   A. Trainee must be a U.S. citizen or permanent resident.

   B. Trainee must not have received more than 2 years of post-doctoral funding from NIH training grants (e.g., T32, NRSA) to be eligible for this award.

   C. Both Ph.D. and MD postdocs are encouraged to apply.

   - MD and MD/Ph.D. applicants must have completed their clinical training or be a 3rd year fellow in clinical training at the time that they are applying.

   - Ph.D. applicants must be pursuing a post-doctoral fellowship in the lab of an OSU T32 mentor doing research relevant to the biology of aging and pulmonary medicine.

2. Include the following documents to the application:

   A. Application form

   B. Current Research: please provide a brief description of your completed and ongoing research (1-page limit).

   C. Proposed Research Project: Please describe (2-page limit) the overarching goals of your research. Include:

   1. Specific areas that you would like to pursue and the questions motivating your research.

   2. An overview of the aims and approach that you intend to take

   3. Identify any methods/techniques or other expertise you anticipate will be necessary to advance your research during your training

   D. Career Goals: What are your long-term career goals and what do you believe is necessary to attain those goals.? What position do you hope to hold 10 years from now?

   E. Curriculum Vitae.

   F. Professional Development Plan: For example, courses, meeting or workshop attendance, teaching /mentoring service opportunities, etc.

   G. Letter of Commitment from Planned Mentor or Mentor team: letter of support from planned mentor(s) describing the resources that they have available and will commit to you and your training during the T32 period.

Training Program in the Biology of Aging and Lung Disease
Application Form

Name:

Date of Birth:

Are you a US citizen or permanent resident? Yes_____ No _____

Email Address:

Phone Number:

Desired start date?

Desired length of term?

Are you currently funded by any grant?