**Minnesota Population Center**

**Population Health T32 Training Program**

**Pre Doc Application Form**

**Application Process**

• Confirm that you are eligible and that a fellowship slot is available:

[z.umn.edu/PreDoc-PopHealth](http://z.umn.edu/PreDoc-PopHealth)

• Obtain the names/titles/contact information for three references.

• Complete the application and submit it along with a CV and Transcript to [fabian@umn.edu](mailto:fabian@umn.edu).

• Questions can be directed to: Lindsey Fabian, [fabian@umn.edu](mailto:fabian@umn.edu).

**1. Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Telephone:** \_\_\_\_\_\_\_----\_\_\_\_\_\_\_\_\_\_\_---\_\_\_\_\_\_\_\_\_

**4. Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Availability date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**6. Fellowship position you are applying for:**

☐ Predoctoral ☐ Postdoctoral

*The following questions are required for NIH reporting purposes:*

**7. Gender**: ☐Male ☐Female ☐ Non-binary/ third gender

☐ Prefer to self-describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ☐ Prefer not to say

**8. Citizenship:**

☐ U.S. Citizen

**OR**

☐ Noncitizen National ☐ Currently valid Alien Registration Receipt Card I-551

☐ With another verification of legal admission as a permanent resident

(describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

**9. Are you Hispanic (or Latinx)?** ☐Yes ☐No ☐ Do not wish to provide

**10. What is your racial background?** (*Check one or more.)*

☐ American Indian or Alaska Native

☐ Native Hawaiian or other Pacific Islander ☐ Asian

☐ Black or African American ☐ White

☐ Other ☐ Do not wish to provide

**11. Do you have a disability?**

☐Yes ☐No ☐ Do not wish to provide

**If yes**, which of the following categories describe your disability(ies):

☐Hearing ☐Visual ☐ Mobility/Orthopedic Impairment ☐Other

**12. Are you from a disadvantaged background\*?**

☐ Yes ☐ No ☐ Do not wish to provide

\*According to the definition from NIH, Individuals from disadvantaged backgrounds are defined as: 1) Individuals who come from a family with an annual income below established low-income thresholds. These income levels are: http://aspe.hhs.gov/poverty/index.shtml. 2) Individuals who come from an educational environment such as that found in certain rural or inner-city environments that has demonstrably and directly inhibited the individual from obtaining the knowledge, skills, and abilities necessary to develop and participate in a research career.

**13. Predoctoral applicants ONLY, please provide the following:**

a. UMN Graduate Degree Program/Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b. Status of Graduate Program acceptance:

☐ Admitted

☐ Current Student, year: ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐ 5th

c. Who are your main faculty advisors/mentors? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

d. Briefly list the major milestones you have completed in your doctoral program (e.g., qualifying exams; coursework, etc) and the next milestone you are focused on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e. Please attach your transcript when submitting your application.

**14. Postdoctoral applicants ONLY, please provide the following:**

a. Name of the University and Department you are getting (or got) your PhD from: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b. PhD Dissertation title and/or other research topic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c. Who are your main faculty advisors/mentors? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**15. Provide a brief personal statement describing your experience,**

**specific research interests and reason for pursuing this training program.** *(Limit* ~ 500 words)

**16. Explain why your research and professional development would benefit from cross-training in the biological and social sides of population health. Be sure to articulate why addressing your research goals requires training and expertise in both biological and social science perspectives.** (*Limit* ~ 500 words)

**17. Briefly describe the relevance of population health to your research (2-3 sentences).**

**18. If you receive this fellowship, what would your research focus be, possibly include health/disease outcome, exposure, specific population, and/or method/approach (2-3 sentences).**

**19. Mentor Information: Please view the list of Health Science/Biology Mentors and the list of Social Science Mentors. Please nominate one person from each list to serve as your primary mentors for this training program. Applicants do not need to reach out to potential mentors before they apply.** [*https://z.umn.edu/Mentors-PopHealth*](https://z.umn.edu/Mentors-PopHealth)

• Potential Health Science/Biology Mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

• Potential Social Science Mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**20. To which track are you applying?**

☐ Biology/etiology of disease (for those with or pursuing a doctoral degree in a social science field)

☐ Social Science (for those with or pursuing a doctoral degree in a health science, biological science,

epidemiology, or other related discipline)

**21. References:** *In evaluating your candidacy, we request that you identify three individuals acquainted with your academic experience and research work. We are particularly interested in their opinion of your research qualifications and potential for an academic and research career. We will request reference letters from final candidates; there is no need for you to request letters now.*

**Please list names, titles and contact information (phone/email) for 3 references:**

1.

2.

3.

**22. How did you hear about our Training Program?**

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

*Please send your application along with your CV and transcript to* [*fabian@umn.edu*](mailto:fabian@umn.edu)*. Questions can be directed to Lindsey Fabian (*[*fabian@umn.edu*](mailto:fabian@umn.edu)*).*