

Postdoctoral Fellowship Application Checklist and Coversheet

Complete Phase One of the application in SLATE per the instructions at www.bit.ly/GordonPostdoc.



GENERAL INFORMATION:

For trainees currently appointed to MD Anderson Cancer Center:

Today's Date	Fellowship start date	Projected fellowship end date.
Full Legal Name	Preferred Name	
Street Address	City/Town	
State/ Province	Zip/Postal Code	Country

Personal E-mail (e.g., Yahoo, Gmail,Hotmail)	Alternate Email	Mobile Phone
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Current/Previous Institution	Current/Previous Department
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Qualifying degree type (e.g., MD, PhD, DrPH, etc.)	Completion date of qualifying degree (e.g. PhD)	If you need continuing certification credits, provide type (e.g., licensed psychologist)
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PROPOSED MENTORS: List all proposed mentors including name with credentials, department and institution. Two mentors must be appointed at MD Anderson, including the primary mentor and both must have complimentary expertise. Visit the fellowship page for details.

Primary Mentor:

First & Last Name	Department	Institution
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Co-Mentors:

First & Last Name	Department	Institution
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First & Last Name	Department	Institution
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First & Last Name	Department	Institution
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First & Last Name	Department	Institution
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First & Last Name	Department	Institution
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PHASE TWO: SUPPLEMENTARY APPLICATION:

Check each box, complete all required fields, sign, and email this sheet and supporting documents to the CP RTP.

Application Checklist & Coversheet: This form signed & dated.

Research and Career Statement: Not to exceed 2 pages. See application instructions for additional details.

Mentor's Profile Form: *Download form from <https://bit.ly/GordonPostdoc>.*

Mentor Support Documents: 1) Letter of Support (LOS), 2) NIH BioSketch, and 3) Other Support: All 3 documents from each proposed mentor and combined into a single pdf file. LOS must be signed and on letterhead

Headshot Photograph: This can be a passport, license or professional photo and will be used for our fellowship awardee roster. Must have neutral, solid colored background.

Proposal Keywords, Title, and Suggested Reviewer Form: Proposed project information and suggested reviewers, if your application is selected. *Download form from <https://bit.ly/GordonPostdoc>.*

CP RTP Fellowship Requirements Memo: Signed by the applicant and primary mentor. *Download form from <https://bit.ly/GordonPostdoc>.*

CP RTP Mentor Requirements Memo: Signed by the primary mentor. *Download form from <https://bit.ly/GordonPostdoc>.*

DEMOGRAPHICS: This data is reported to our funding agency to promote diversity and inclusion among our applicants and is never used in a discriminatory manner. The CPRTP strongly encourages applications from individuals with disabilities, from underrepresented backgrounds, and underserved communities in biomedical science. Your responses would be helpful and appreciated.

In your own words, please define your gender:

Are you Hispanic or Latino (including Spain)?

Select the racial category that best describes you.

List any additional racial ethnicities.

Primary language spoken at home:

Preferred language:

Are you the 1st in your immediate family to graduate from college?

Pronouns

Mother's highest degree earned?

Father's highest degree earned?

Do you qualify as an individual from a **disadvantaged background** based on the following federal criteria?: (1) Come from an environment that inhibited the individual from obtaining the knowledge, skill and ability required to enroll in and graduate from a health professions school; or (2) Come from a family with an annual income below a level based on low-income thresholds according to family size published by the U.S. Bureau of the Census, periodically published [in the Federal Register](#).

SIGNATURE: ONLY the applicant's signature is required.

Applicant's Signature

Date:

SUBMISSION INSTRUCTIONS

1. Print and enter all required data on pages 1 and the top of page 2 of this checklist.
2. Compile all documents and check off each item on page 1.
3. Sign and date [this checklist](#) and [trainee requirement memo](#) (obtain other signatures requested).
4. Upload your headshot photograph in Slate by adding a new document titled "Photograph".
5. Upload this form and all other required documents in the Slate system and submit when complete.

IMPORTANT NEXT STEPS

Per the application instructions, **The Cancer Prevention Research Training Program (CPRTP)** will evaluate your application and selected awardees will be invited (via e-mail) to submit a **Research and Career Proposal**. After proposal submission, there will be two separate processes occurring simultaneously: (1) the **review** of the research and career proposal by the CPRTP Advisory Committee; and (2) the processing of your **appointment** and **visa sponsorship (if applicable)**, as a Postdoctoral Fellow to the department of your primary mentor.

Appointment

The appointment process is managed by the **MD Anderson Office of Research Trainee Programs (RTP)** in the **Slate** system, a web-based on-line application portal. Slate processing will take a **minimum** of three weeks and longer for those applicants who have not yet received their doctoral degree. You may be required to upload these additional documents in Slate:

- **Immunization Compliance Report:** Detailed immunization instructions are available in the Slate system. All immunization and health documents must be uploaded into the **Castle Branch** system, which requires a non-refundable, non-reimbursable \$30 processing fee. Castle Branch is separate from the Slate system and overseen by the **MD Anderson Department of Employee Health**. Required immunizations include MMR, Chicken Pox, TB Skin Test, Tdap and must be current. **The TB skin test must be current within one (1) year of application submission date. Since obtaining a TB test and reading takes a minimum of 3 business days, it is recommended that this is completed at the time of application.**
- **Proof of COVID vaccine or proof of exemption.**
- **Personal and Criminal History Background Check:** Instructions and the link to complete this electronically will be sent via e-mail.
- **Proof of Selective Service Registration:** Complete and upload the form, and provide proof, if required.
- **Export Control Review Form:** This form will be completed by the home department or CPRTP.
- **English Proficiency (if applicable):** This form will be completed by the home department or CPRTP.
- **Proof of External Funding:** Ignore this form, the home department or CPRTP will complete.

Visa Sponsorship

International applicants who are not U.S. Citizens or Permanent Residents must have a valid and appropriate U.S. visa at the time of application to be able to start the fellowship by the dates communicated on the program page (www.cancerpreventiontraining.org > Postdoc Fellowships).

The awardee can begin their postdoctoral fellowship and receive funding once all aforementioned contingencies have been met: (1) Appointment in the Slate system, including immunization compliance, (2) Visa sponsorship processing (if applicable); and (3) research and career proposal approval by the CPRTP.

Failure to meet or comply with these contingencies in a timely manner will either delay or forfeit this postdoctoral fellowship.