

## Cancer Biology T32 Training Grant Application

### Trainee Candidate

APPLICANT:	POSITION/TITLE:
EMAIL:	eRA Commons ID:
PERSONAL EMAIL (Please share an email that we may use to remain in contact with you if/when you leave the university):	
PRIMARY MENTOR NAME and EMAIL (one only):	ASSOCIATE MENTOR(s) NAME and EMAIL:

EDUCATION/TRAINING: *(Begin with baccalaureate or other initial professional education)*

INSTITUTION AND LOCATION	DEGREE / GPA <i>(if applicable)</i>	DATE (mm/yyyy)	FIELD OF STUDY

T32 Project Title (must be cancer-related):	
Are you applying for a predoc or postdoc slot?	
Date when you started predoc or postdoc training	
Requested start date of T32	
If applicable, all associated IRB / IACUC protocol numbers and most recent approval date. Please note who the PI of the protocol is. If pending, so state.	
Estimate of credit hours for first 12 months.	
Are you a U.S. citizen, noncitizen national or permanent resident?	YES                      NO

#### **\*Demographic Information**

Gender	
Race/Ethnicity (Select all that apply)	American Indian or Alaska Native Asian Black or African American Hispanic or Latinx Native Hawaiian or Other Pacific Islander White or Caucasian Other not listed Prefer not to disclose

<p>Individuals with disabilities, defined as those with a physical or mental impairment that substantially limits one or more major life activities as described in the Americans with Disabilities Act of 1990, continue experience lack of access to training in biomedical, clinical, behavioral and social sciences.</p> <p><b>Do you belong to this ILAR category?</b></p>	<p>YES                      NO                      Prefer not to disclose</p>		
<p>Individuals from low-socioeconomic, or disadvantaged, backgrounds, fall under the criteria below:</p> <ul style="list-style-type: none"> <li>• Were or currently are homeless, as defined by the <a href="#">McKinney-Vento Homeless Assistance Act</a></li> <li>• Were or currently are in the foster care system, as defined by the <a href="#">Administration for Children and Families</a></li> <li>• Were eligible for the Federal Free and Reduced Lunch Program for two or more years</li> <li>• Have/had no parents or legal guardians who completed a bachelor's degree (i.e., first-generation college attendees)</li> <li>• Were or currently are eligible for Federal Pell grants</li> <li>• Received support from the <a href="#">Special Supplemental Nutrition Program for Women, Infants and Children</a> (WIC) as a parent or child</li> <li>• Grew up in one of the following areas: <ul style="list-style-type: none"> <li>a) a U.S. rural area, as designated by the Health Resources and Services Administration (HRSA) <a href="#">Rural Health Grants Eligibility Analyzer</a> .</li> <li>b) a Centers for Medicare and Medicaid Services-designated Low-Income and Health Professional Shortage Areas</li> </ul> </li> </ul> <p><b>Do you belong to this ILAR Category?</b></p>	<p>YES                      NO                      Prefer not to disclose</p>		

**\*Demographic Information:** Please note that we collect this information for reporting purposes only. This data will be kept confidential and only aggregate data will be reported. You may select "Prefer not to disclose" if you do not feel comfortable providing this information. This information will not be considered for making appointee decisions.

In addition, based on a highly regarded National Science Foundation Report, many individuals systemically lack access to research (ILAR) careers and training opportunities. We would like to collect metrics regarding membership in these long-recognized ILAR groups, which include several categories:

A: Certain Ethnic and Racial Groups: Latinx/Hispanic, Black or African-American, Native Hawaiian and other pacific islanders, Native American, and Alaska Natives

B: Disabilities that substantially limit one or more major life activities as described in the Americans with Disabilities Act of 1990.

C: Low socio-economic, or disadvantaged, background