APPLICATION

NIH POSTDOCTORALMULTIDISCIPLINARY TRAINING PROGRAM IN BASIC DIABETES RESEARCH

MICHIGAN MEDICINE
UNIVERSITY OF MICHIGAN

Division of Metabolism, Endocrinology, and Diabetes
University of Michigan Medical School
1000 Wall Street, 5100 Brehm Tower
Ann Arbor, Michigan 48105
Phone: (734) 615-9496
Fax: (734) 232-8162
Visit our website

We welcome you to apply for one of our four post-doctoral training positions available. You will be competing for one year of support with the possibility of a second year of funding, pending progress and productivity.

PURPOSE

Postdoctoral Fellowships have been established through an NIH-supported Training Grant (T32DK101357), entitled, "Multidisciplinary Training Program in Basic Diabetes Research." This program provides an opportunity for postdoctoral fellows to pursue training in diverse aspects of diabetes research. Training grant preceptors fall into major interest groups across the spectrum of type 1 and 2 diabetes research – islet biology, autoimmune diabetes, adipocyte biology, neuronal regulation of metabolism, mechanisms of insulin resistance, metabolic control in liver and muscle, and diabetes complications - each area containing investigators pursuing basic research with potential translational applicability.

ELIGIBILITY

The applicant must:

1. have a Ph.D. or equivalent degree(s) and a desire for a career in diabetes research
2. have a doctoral degree and have no more than three years of postdoctoral training
3. be a U.S. citizen or permanent resident
4. submit their application by June 1st, 2020

MENTOR REQUIREMENTS

1. The mentor and co-mentor (if applicable) must provide a recent NIH style Biosketch and Other Support pages, or the equivalent.
2. *The mentors must provide a Letter of Support describing:*
   a. The trainee's strengths and appropriateness for the award.
   b. The involvement of each laboratory in the training program; each mentor must state what aspects of the training he/she will be involved in, describing specifically the elements of the laboratory setting or areas of expertise that are important to the success of the interdisciplinary project.
   c. The procedures that will be followed by the mentors to monitor trainee progress and deal with unexpected findings.
3. Mentor Biosketch, Other Support, and Letters of Support should be sent electronically by June 1st, 2020 to:
   Martha Rhodes
   Division of Metabolism, Endocrinology and Diabetes
   University of Michigan Medical School
   Phone: (734) 232-2252
   Email: marrhode@med.umich.edu

TRAINEE REQUIREMENTS

1. Applicants should complete the Application Form found below.
2. Postdoctoral trainees should submit a brief Research Proposal (maximum three pages*).
   a. Specific Aims
   b. Background and Significance (include preliminary results, if any, in this section)
   c. Experimental Approaches and Limitations

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**Copies of relevant publications by the trainee may be submitted as an appendix.*

3. In addition to a letter from the mentor, the trainee should provide one additional Letter of Reference. The letter should address the trainee's academic qualifications, intellectual strengths and probability for success in carrying out an interdisciplinary project. All recommendation letters must be received by June 1st, 2020.
4. The trainee should also submit their updated curriculum vitae. Please include citizenship, mailing or electronic mailing address, degrees, professional and honorary societies, thesis and publications, previous training support, and copies of undergraduate and graduate transcripts.

Note that this is a federally-funded award which mandates a Payback Agreement for Postdoctoral Trainees.

APPLICATION CHECKLIST

- Application Form (see below)
- Trainee CV
- Research Proposal
- Publications (if applicable)
- One additional Letter of Reference
- Participating Mentors: NIH Biosketch, Other Support, Letter(s) of Reference

Email your completed application to marrhode@med.umich.edu
by June 1st, 2020. Please ask for confirmation of receipt of application.

It is the policy of the University of Michigan to comply with the Americans with Disabilities Act (ADA) of 1990, Section 504 of the Rehabilitation Act of 1973, and other applicable federal and state laws that prohibit discrimination on the basis of disability.

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Applicant Name	
Employee ID Number	
Department	
Title of Proposal	
Campus Address/Box	
Campus Phone	
Email	
Applicant's Citizenship Status	
Contact Info. of Administrative Individual in your Department	

Have you been appointed to a NIH training mechanism in the past? ☐ Yes ☐ No

If "yes," please indicate your status when on the NIH training mechanism:

Predoc		Number of Years Funded	
Postdoc		Number of Years Funded	

Primary Mentor		Department	
Title			
Campus Address/Box			
Campus Phone		Email	

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Collaborating Mentor *(if relevant)* | Department

Title

Campus Address/Box

Campus Phone | Email

☐ Check here if this project involves Human Subjects. Provide IRB numbers and approval dates:

☐ Check here if this project involves Animal Use. Provide UCUCA numbers and approval dates:

☐ I am currently supported by another training grant or fellowship. This fellowship will expire on:

☐ I have had ____ previous years of NRSA support.

☐ I am not currently supported by another training grant or fellowship and do not anticipate support from another training grant/fellowship within the next year.

☐ I am also applying to other training grants/fellowships (please list below):

____ Minority Code

1 - American Indian/Alaskan Native
2 - Asian
3 - Black/African American
4 - Hispanic/Latino
5 - White
6 - Native Hawaiian/Other Pacific Islander
0 - Use this code if you would prefer not to provide this information