HBCS PREDOCTORAL FELLOWSHIP

**Renewing Applicant**

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|  |

**Name**

|  |  |
| --- | --- |
| **Mailing address:** |  |
| **Phone:** |  |
| **Email:** |  |

**Mentor(s) information:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **Name:** |  |
| **Phone:** |  | **Phone:** |  |
| **Email:** |  | **Email:** |  |

**Requested fellowship renewal date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Start date (month/year) of graduate school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of graduate program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of months of previous HBCS predoctoral training support (up to the time of the proposed HBCS start date). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of total months of previous federal training support (e.g., HBCS Training Grant, Neuroscience Training Grant, individual NRSA fellowship) up to the time of the proposed HBCS start date. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please add to this form the following items, composed according to application guidelines and in this order, then save as single pdf file for submission (a support letter from your mentor that addresses guideline requests should be submitted separately):

**[ ]  Curriculum Vitae**

**[ ]  Summary of progress during preceding period of support in your career training plan and in your research training plan (reflecting the specific aims of the original application); brief summary of the career and research plans for the renewal year of support (three-page limit, excluding references)**

**[ ]  Paragraph detailing participation in required programs (seminars, lunch meetings with speakers, Research Responsibility Program)**

**[ ]  List of publications and/or presentations associated with training during the preceding period of support**

**[ ]  Copies of publications during the preceding period of support**

**[ ]  Transcript of grades for courses taken during graduate training**

**[ ]  Mentor’s Letter of Support: Include a letter of support from the mentor(s) that outlines the qualifications of the applicant for a research career in hearing, balance, and chemical senses. The mentor should also specify the source of funds for support of the research training (supplies, equipment, etc.), a specific rationale for the request of training grant support and a brief plan for support of the remainder of the applicant’s training.**

**[ ]  For trainees applying for a third year (or beyond) of support from the training grant: UM Proposal Application Form (PAF) associated with submission of an individual NRSA fellowship application to NIH, and the reviews for this submission, if available.**