

UW Cardiovascular Research Center
Training Program in Translational Cardiovascular Science (TPTCS)
T32 HL007936
General Application, Year 24 [9/1/2024 - 8/31/2025]

Name:	
Date of Birth:	
Citizenship: *	
Are you on a visa?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gender:	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other <input type="checkbox"/> Prefer not to answer
What is your eRA Commons name:	
What is your student ID number?	
UW Office Address: UW Office Telephone:	
Home Address:	
Permanent Address: <i>If different from above</i>	
Home/Cell Telephone:	
Email Address:	
We seek to broaden the diversity of the TPTCS: Do you identify as Black, Indigenous, or a Person of Color (BIPOC)? Are you the first member of your family to obtain an undergraduate degree? Do you have a disability?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer
Undergraduate Education: <i>Please include institution and department; provide dates (MM/YY), degree(s) received, and major(s)</i>	

<p><i>Predoctoral Applicants Only</i></p> <p>Undergrad GPA:</p>	
<p>Graduate Education:</p> <p><i>Please include institution and department; provide all dates (MM/YY), degrees received (if applicable), major, GPA</i></p>	
<p>Previous UW stipend funding and other training grant (T32) support:</p> <p><i>Please provide award number (if known), PI name, and dates of support (MM/YY)</i></p>	
<p>Current UW stipend funding:</p>	
<p>Are you applying for other funding?</p> <p><i>If yes, please indicate what you are applying for and the tentative start date</i></p>	
<p>If you do not receive this traineeship, how do you expect to be funded next year?</p>	
<p><i>Postdoctoral Applicants Only:</i></p> <p><i>Please indicate current and previous training positions (including Residencies & Fellowships), location, dates and mentor name. Provide PhD thesis title, and research advisor name</i></p>	
<p>Proposed or Current Research Area:</p>	
<p>Proposed Trainer: **</p> <p>Date of Trainer's last or pending Mentor/Trainer training</p>	

* Trainees must be U.S. citizens or a non-citizen national or have been lawfully admitted for permanent residence to the U.S. to be considered for this training grant.

** Candidate forms must be submitted by a ***Training Program in Translational Cardiovascular Science*** Trainer

FOR FURTHER INFORMATION, please contact Eric Schafer at eeschafer@wisc.edu