## **Application Form**

The REACH Applied Epidemiology Training Program provides training for the next generation of researchers dedicated to ensuring positive weight-related health among young people and families from diverse communities. The program offers training to predoctoral (PhD) and postdoctoral fellows.

## Instructions:

Please complete this form and submit it along with the supporting documents listed below. All application materials should be sent to the program email address <u>hwpT32@umn.edu</u>. Two letters of recommendation should also be submitted by your references in separate messages to <u>hwpT32@umn.edu</u>. Application materials include:

- Curriculum vitae
- Transcripts
- Sample publication or writing sample (for example, a paper, manuscript, funding proposal or other professional document first-authored by the applicant)
- 1. Name:
- 2. Address:

City, State, Zip:

- 3. Telephone:
- 4. Email:
- 5. Availability date:
- **6. Education:** (*Please attach copies of your college transcripts.* Official copies are preferred but not required.)

Institution, Department,	Year Att	ended	Received	Major	Minor
and Location	From	То	Degree Mo.& Yr.	Field	Field

## 7. Professional experience: (Please attach a copy of your curriculum vitae.) Dates Job Title Brief Description Employer

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<u>Dates</u> (MM/Yr)				
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- 8. Other relevant experience:
- **9. Scholarly contributions:** [Attach 1) list of publications and presentations; 2) publication/writing sample.]
- **10.** If you are applying for a <u>Predoctoral</u> Fellowship, please indicate the status of your Graduate Program acceptance:
  - 1 Admitted or current student
  - 2 Admissible pending identification of advisor
  - 3 Unknown
- 11. If you are applying for a <u>Postdoctoral</u> Fellowship, please provide the following information:
  - a. Thesis research topic and/or other research topic (if relevant):
  - b. Research advisor:
- 12. Briefly describe your research interests relating to the promotion of healthy eating and physical activity (250 words or less).

13. Briefly describe your research interests relating to youth and families from diverse communities (250 words or less).

14. Briefly describe your research career goals and how do you see this research training contributing to these goals (250 words or less).

15. We are interested in promoting a training atmosphere, institute, and society that is devoted to diversity, equity, inclusion, and anti-racism. Please share your thoughts on how you will contribute to the promotion of these principles (250 words or less).

16. Please list the names, title, and organization of those references you have requested:

Name	Title	Organization

- **17. Mentor Preferences:** [Indicate your preference for primary and co-mentor(s). See the list of program faculty on the training program website (https://z.umn.edu/REACHT32). Final mentor selection will be made by the Program Director, but trainee preference will be taken into account.]
  - Primary Mentor from Program Faculty:
  - Co-Mentor from Program Faculty:
  - Co-Mentor from Program Faculty:

## Research on Eating and Activity for Community Health Applied Epidemiology Training Program

(This request for confidential information will allow us to fulfill NIH reporting requirements)

1.	Gender: Male Female Other, please specify: Do not wish to answer
2.	Pronouns:
	He/him She/her They/them Other, please specify:
	Do not wish to answer
3.	Citizenship:
	Non-U.S. Citizen With a Permanent U.S. Resident Visa ("Green Card") With a Temporary U.S. Visa
	If not a U.S. citizen, of which country are you a citizen?
4.	Do you identify as Hispanic or Latino? Yes Do not wish to answer
5.	
<b>J</b> .	Do you identify as one or more of the following races? Select one or more.           American Indian or Alaska Native
0.	<ul> <li>American Indian or Alaska Native</li> <li>Native Hawaiian or other Pacific Islander</li> </ul>
5.	<ul> <li>American Indian or Alaska Native</li> <li>Native Hawaiian or other Pacific Islander</li> <li>Asian</li> </ul>
5.	<ul> <li>American Indian or Alaska Native</li> <li>Native Hawaiian or other Pacific Islander</li> <li>Asian</li> <li>Black or African American</li> </ul>
	<ul> <li>American Indian or Alaska Native</li> <li>Native Hawaiian or other Pacific Islander</li> <li>Asian</li> </ul>
	<ul> <li>American Indian or Alaska Native</li> <li>Native Hawaiian or other Pacific Islander</li> <li>Asian</li> <li>Black or African American</li> <li>White</li> </ul>
6.	<ul> <li>American Indian or Alaska Native</li> <li>Native Hawaiian or other Pacific Islander</li> <li>Asian</li> <li>Black or African American</li> <li>White</li> </ul>
	<ul> <li>American Indian or Alaska Native</li> <li>Native Hawaiian or other Pacific Islander</li> <li>Asian</li> <li>Black or African American</li> <li>White</li> <li>Do not wish to answer</li> </ul> Do you have a disability as defined by the American with Disabilities Act?