

****HIV RESEARCH TRAINING FUNDS
AVAILABLE FOR JULY/AUGUST 2018****

We would like to announce the availability of NIH-funded T32 HIV Research Training Funds to Harvard University available **beginning July/August 2018**. The goal of the program is to train both MD and PhD investigators for careers in HIV research. Potential areas of investigation include all areas of HIV/AIDS research, ranging from the laboratory to the clinic, including epidemiology, outcomes, implementation, and health policy studies. Funding is available from two Harvard T32 grants, one focused primarily on laboratory-based studies (P.I. Dr. Daniel Kuritzkes) and the other on clinical research including clinical epidemiology and outcomes research (P.I. Dr. Kenneth Freedberg). This funding is available to post-doctoral fellows (MD or PhD) on both grants; pre-doctoral PhD candidates are also eligible for Dr. Freedberg's grant. Both training grants cover salary or stipend, travel to professional meetings, and other training-related expenses. Tuition for the Program in Clinical Effectiveness at Harvard T.H. Chan School of Public Health or PhD coursework may be covered for some fellows. Applicants must be nominated by a mentor who is an independently-funded investigator.

The application consists of 4 parts:

1. Application Form (attached)
2. Applicant statement of research plan. **This should be 3 pages maximum excluding references, single spaced with 11 point Arial font and 1" margins.**
 - a. Specific aims
 - b. Background
 - c. Research design and methods
 - d. Career goals
3. Applicant CV
4. One letter of nomination from mentor

Please follow these guidelines closely.

All application materials should be e-mailed by PDF to:

Olga Henry-Saturne
osaturne@rics.bwh.harvard.edu
617-525-4250

All application materials are due by 5PM EST, Thursday, February 1, 2018.

Notification of awards will be in April, 2018.

*Please note: Applications for the Harvard Chan School of Public Health Summer Program in Clinical Effectiveness are also due at HSPH on February 1, 2018 **and have a different application than this one**. For more information, please visit: <http://www.hsph.harvard.edu/clineff/>

Citizenship and Recruitment of Underrepresented Groups

Per NIH guidelines, applicants must be citizens or non-citizen nationals of the United States or have been lawfully admitted for permanent residence at the time of appointment. Persons from underrepresented groups including, but not limited to, African Americans, Hispanic Americans, Native Americans, Alaskan Natives, Pacific Islanders, women, persons with disabilities, and persons from disadvantaged backgrounds are strongly encouraged to apply.

We look forward to reviewing your application. If you have questions about these programs, please contact Maeve Mackey (mmackey1@mgh.harvard.edu or 617-724-8445) for the clinical epidemiology/outcomes/implementation research slots, or Olga Henry-Saturne (osaturne@rics.bwh.harvard.edu)

or 617-525-4250) for the laboratory-based research slots. Please share this announcement with other interested candidates.

Harvard HIV Research Training Grant (NIH-funded T32) Application for July 2018

I. Candidate Information (Required)

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Candidate for (please check one): Pre-doctoral _____

Post-doctoral _____

School and Department if pre-doctoral: _____

Clinical site if post-doctoral: _____

Potential interest in Program in Clinical Effectiveness at Harvard T.H. Chan School of Public Health:

_____ Very Interested _____ Somewhat Interested _____ Not Interested

Mentor: _____

Mentor's phone: _____

Mentor's email: _____

II. Self-identification (Voluntary)

Harvard University has adopted affirmative action programs to provide full employment opportunities for qualified women and minorities, qualified disabled persons, and qualified disabled veterans. We invite you to inform us if you are a member of a protected class, if you have a disability, or if you are an Iraq, Afghanistan, or other disabled veteran. This information is voluntary and providing or refusing it will NOT subject you to any adverse treatment. Please answer each section by checking the appropriate response.

Self-Identification

For Affirmative Action purposes, Harvard is required by law to keep track of the race and sex of all applicants. We invite you to assist us in keeping accurate records by self-disclosing your race and sex. This information is completely voluntary and will not be kept in your personnel file.

_____ Male _____ Female

_____ Black or African-American (not of Hispanic origin): A person having origins in any of the black racial groups of Africa.

_____ Asian, not underrepresented: A person having origins in any of the Asian subpopulations not considered underrepresented in the health professions include Chinese, Filipino, Japanese, Korean, Asian Indian, or Thai.

_____ Asian, underrepresented: A person having origins in any of the Asian subpopulations considered underrepresented in the health professions include any Asian OTHER THAN Chinese, Filipino, Japanese, Korean, Asian Indian, or Thai. (i.e., Cambodian, Vietnamese, Malaysian)

_____ Native American or Alaskan Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintain cultural identification through tribal affiliation or community recognition.

_____ Hispanic or Latino: A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race. Only those persons from Central and South American countries who are of Spanish origin, descent, or culture should be included in this classification. Persons from Brazil, Guyana, Surinam, or Trinidad, for example, would be classified according to their race and would not necessarily be included in the Hispanic classification. In addition, this classification does not include persons from Portugal, who should be classified according to race.

_____ White (not of Hispanic origin): A person having origins in any of the original peoples of Europe, North Africa or the Middle East.

_____ Native Hawaiian or other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Self-Identification for Persons with Disabilities

In accordance with Sections 503 and 504 of the Rehabilitation Act of 1973, the provision of this information is on a voluntary basis and will be maintained in a separate location for affirmative action program use and will not be included in the personnel file of any employee for employment.

DEFINITION: DISABILITY STATUS

The following are examples of some, but not all, disabilities which may be included: AIDS, asthma, arthritis, color or visual blindness, cancer, cerebral palsy, deafness or hearing impairment, diabetes, epilepsy, HIV, heart disease, hypertension, learning disabilities, mental or emotional illnesses, multiple sclerosis, muscular dystrophy, orthopedic, speech or visual impairments, or any other physical or mental impairment which substantially limits one or more of your major life activities. Please indicate if you are:

_____ Disabled _____ Not disabled

Self-Identification for Persons from Disadvantaged Backgrounds

We are required to report the number of individuals applying to, admitted to, and graduated from our program who meet federal definitions for coming from "disadvantaged backgrounds" or "medically underserved communities." The provision of this information is voluntary and will not be included in the personnel file of any employee for employment.

The definition of "Disadvantaged" is that which is currently in use for health professions programs (42 CFR 57.1804 (c)) and includes both economic and educational factors that are barriers to an individual's participation in a health professions program. This means an individual who:

(a) comes from an environment that has inhibited the individual from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession; or

(b) comes from a family with an annual income below a level based on low-income thresholds according to family size, published by the U.S. Bureau of the Census, and adjusted annually for changes in the Consumer Price Index, and by the Secretary for use in health professions programs.

“Medically Underserved community” means an urban or rural population without adequate health care services. If you are unsure about whether your community qualifies, we can use the following geographic information to make that determination:

State _____

County _____

City or Town, State, Zip code _____

Please indicate if you believe you are from a:

Disadvantaged Background _____ Yes _____ No

or Medically Underserved Community _____ Yes _____ No