**TISSUE ENGINEERING AND REGENERATION TRAINING GRANT**

TEAM Nomination– 2022 (for yr 46)

Updated Deadline – March 21, 2022

**NOMINATION FACE PAGE**

**Nominee Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Applicant | | Social Security Number (last four digits)  XXX-XX- | | Sex (M/F/X) |
| Permanent Mailing Address | | Local Mailing Address | | |
| UM ID | | Local Telephone Number | | |
| Birthdate (mo/day/yr) | | E-mail Address – UMICH email | | |
| Are you delinquent on the repayment of any federal debt(s)?  Yes  No  If "Yes,” please provide an explanation on a separate sheet of paper. | | **Ph.D. Student Applicants** PhD:  DDS/PhD:  Please designate degree-granting program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_ Pre-Candidate - specify resident (R) or non-resident (NR): R NR  \_\_\_\_\_ Candidate Expected term/year of Candidacy \_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Have you been appointed to a NIH training mechanism in the past?  Yes  No  If "Yes,” please indicate your status when on the mechanism:  Predoc: \_\_\_\_\_\_ # of years funded: \_\_\_\_\_\_  Posdoc: \_\_\_\_\_\_ # of years funded: \_\_\_\_\_\_ | | **Are you applying to the TEAM training program as a:**  Post doc Fellow Please designate department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_ date (mm/yy) you received PhD  \_\_\_\_\_\_\_\_\_ date (mm/yy) you received DDS or MD | | |
| Mentor Name and Contact Information | | Plans to write F or K Award ?  Yes  No | | |
| Degree(s) Sought: | Moth and Year Expected: | | Are you in good academic standings:  \_\_\_\_\_\_ Yes \_\_\_\_\_\_\_\_\_No | |

***PLEASE NOTE: Due to NIH/NIDCR funding, Trainees must be US citizens or permanent residents. Please check to confirm***

**Education**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of Institution, Department & Location** | **Month and Year Attended** | | **Degree(s) received** | | **Major Field** | **Minor Field** |
| (Most recent) | From | To | Degree | Mo & Yr |  |  |
|  |  |  |  |  |  |  |
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**Required Documentation**

|  |
| --- |
| Academic Record (Transcripts – unofficial)  Three letters of Recommendation (1 from T-32 mentor)  Research Description with Specific aims   * Relevance of Aims to Tissue Engineering and Regeneration   Past funding information (UM history and any previous grant appointments)  Curriculum Vita |

**Submit materials to the School of Dentistry Office of Research**

[**TEAM NOMINATION FORM**](https://docs.google.com/forms/d/e/1FAIpQLSf78FzqYUg9tXeLfs-G2t6gjDs8NSPrmDWsynzdIbOy4EPdYg/viewform?usp=sf_link)

<https://forms.gle/uCCSEdp5Gm3vBxFz9>

Updated Deadline: March 21, 2022 | Questions email dent-team-t32@umich.edu