Application for Pharmacological Sciences Predoctoral Fellowship 2025/2026

Applicant Information:

Name (last, first, m.i.):		
Campus Address:	Campus phone:	
RCID: eRA Commons ID:		
Citizenship Status: (F1 visa is not an eligible status	s)	
U.S. Citizen or Noncitizen National		
Non-U.S. Citizen With a Permanent U.S. Resident Visa ("Green Card")		
If not a U.S. citizen, of which country are you a citizen?		
University of Iowa Affiliation: (Attach copy of curren	t UI transcript – unofficial transcripts acceptable)	
Graduate subprogram:	PhD mentor/advisor:	
MSTP: ges no	Mentor department:	
Date started PhD program:	Estimated date for completion of PhD:	
Current UI GPA:		
*** I have taken the Online CITI	Training	
Undergraduate Degree, Training: (Attach copy of u	ndergrad transcript – unofficial transcripts acceptable)	
Institution:	Degree awarded:	
	Date of award (mo/yr):	
Undergraduate major(s):		
Post-Baccalaureate Education/Training:		
Institution:	Degree awarded:	
Mentor(s):	Date awarded (mo/yr):	
Area of study:	GPA:	

Months of Prior, Full-Time Research Experience:

Prior, full-time research experience indicates research experience gained before starting your graduate PhD program at the University of Iowa.

- Enter the total number of months of prior, full-time research experience.
- For many individuals, this value will reflect months of summer research experience or full-time research experience following college.
- For those with part-time, academic-year research experience for academic credit, convert the part-time experience to full time (e.g., 15 hours/week for 8 months).
- Do not include labs associated with a course (e.g. organic chemistry course with lab).
- If you completed a master's degree prior to acceptance into your current graduate PhD program, that research experience should be counted.

Enter the number of months of prior, full-time research experience

Honors and/or Awards:	
Publications, Abstracts or Presentations:	

State	ement	of Re	searc	h Go	als:
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This should summarize ongoing work and planned thesis research in titled aims page format. (Limit this to the space below and one additional page, please.)

Additional page:

Career Pla	<u>ns</u> :	
Letters of	f Recommendation: (2-page lim	nit for each letter)
conductin	ig research in Pharmacological Sc	om three referees who can comment on training and potential for siences. One of these should be your current or proposed PhD eir letter to Linda Buckner, linda-buckner@uiowa.edu.
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Please contact: Linda Buckner, 335-7946, <u>linda-buckner@uiowa.edu</u>

You may also contact the Co-PI's of this training grant: Stefan Strack, Ph.D., 384-4439

stefan-strack@uiowa.edu

David Roman, Ph.D., 335-6920 david-roman@uiowa.edu

<u>Deadline for receipt of applications AND letters of recommendation is Friday, May 16, 2025</u>. Applications should be sent electronically; save as a pdf file with your name in the file name (example: LastName PharmT32App). Please send the pdf file by e-mail to linda-buckner@uiowa.edu.

TO WHOM IT MAY CONCERN:

I, the applicant, hereby give permission to the Pharma Committee to examine and reproduce materials in my application.	•			
Signature:	Date:			
the "Statement of Research Goals" was written by the yet to graduate a student, I agree to select a more set	,			
Signature:	Datc.			
Checklist for application (please complete)				
☐ 1. Completed application form	3. Undergraduate transcript (unofficial accepted)			
☐ 2. Current UI transcript (unofficial accepted)	☐ 4. Requests made for 3 letters of support			