# Summer CHER Institute Fellows Eligibility and Sample Application

## Eligibility Screening

As the CHER Institute is federally funded the following eligibility criteria is required. Please review the following criteria to establish you are eligible for the CHER Institute II before completing and submitting your application. If you have any questions about your eligibility, please contact Dr. Wendy Nomura at Wendy.Nomrua@csulb.edu.

|  |  |  |
| --- | --- | --- |
| **CHER Institute II Fellows Eligibility Criteria** | **Eligible** | **Ineligible** |
| I currently hold a tenure/tenure track position at an institution that is eligible to receive federal funding. | Yes | No |
| I am a US citizen or have permanent resident status in the United States. (Required by NIH for this R25 training grant.) | Yes | No |
| I have completed my terminal degree within the last 10 years. | Yes | No |
| I have never received NIH R01 or NIH K grant funding.  | Yes | No |
| I am committed to community-engaged biomedical research with basic, clinical, or behavioral outcomes to eliminate health disparities among racial/ethnic minority populations.  | Yes | No |
| I have experience conducting research and publishing in peer-reviewed journal(s) | Yes | No |
| I am able to commit to attend the full six-day summer session June 5-10, 2023 online | Yes | No |

# Sample Application

The following is a sample application with comments to help you with completing the application. Please use the application template to complete your application (all components are submitted as a single .docx). Please send application and have letters of recommendation sent to Wendy.Nomura@csulb.edu and Cc: CSULB-CHER@csulb.edu

# CURRICULUM VITAE

Name: **Jane P. Doe, Ph.D.**

Position: Associate Professor, Department of Health Science

California State University, Long Beach

1250 Bellflower, Blvd. Long Beach, CA 90840

Voice/Text: (XXX) XXX-XXX

Email: XXXXXXXX@XXX.edu

## EDUCATION:

2010-2014 Univ. of Calif. Los Angeles, Dr.PH.,

2008-2010 Univ. of Calif. Los Angeles M.P.H. Community Health

2004-2008 Univ. of Calif. San Francisco, B.S. Physical Therapy

## PRINCIPAL ACADEMIC POSITIONS:

2020-now Associate Professor (w/tenure), California State University, Long Beach, School of Public Health

2014-2020 Assistant Professor, California State University, Long Beach, School of Public Health

## HONORS AND AWARDS:

2018 Summer, CHER Institute Fellow

2015 Award for Early Career Faculty, California State University, Long Beach

2014 Harvey Scholar Award Recipient, University of La Verne

## KEYWORDS/AREAS OF INTEREST:

Fall Prevention, Gait Analysis, Medical Home, Transportation Co-Operatives, Low Income Elderly

## RESEARCH AND CREATIVE ACTIVITY:

NCBI Bibliography #: https://www.ncbi.nlm.nih.gov/books/NBK53595/

ORCID Identifier: https://orcid.org/

### RESEARCH AWARDS AND GRANTS POST CHER INSTITUTE

*This should be blank until after participation in the CHER Institute. Clearly demonstrate the funding source (internal, external, federal, etc.).*

#### Funded

1. Start Date-End Date (% time as PI) Your role if not the PI
Title
Funder/mechanism
Annual Direct Costs
Total Direct Costs
2. 2020-2025 (PI, 20%).
“Fall Prevention for Low Income Older Adults”
VA Merit Review Award
Annual Direct Costs: $137,500
Total Direct Costs: $550,000

#### Submitted Awaiting Decision

1. 2023-2025 (Co-PI, 15%)
“Gold-Star Manor Transportation Co-Operative”
CSULB-RWCA University Wide Research Programs

Annual Direct Costs $200,000

#### Submitted and Not Funded

1. 2021-2023 (PI, 15%)
“Aging with AIDS”
National Institute on Aging, NIH R15
Annual Direct Costs $200,000
Total Direct Costs: $450,000

### RESEARCH AWARDS AND GRANTS POST TERMINAL DEGREE & PRE-CHER INSTITUTE

1. Start Date-End Date (% time as PI) Your role if not the PI
Title
Funder/mechanism
Annual Direct Costs
Total Direct Costs
2. 2020-2025 (PI, 20%).
“Fall Prevention for Low Income Older Adults”
VA Merit Review Award
Annual Direct Costs: $137,500
Total Direct Costs: $550,000

## PEER REVIEWED PUBLICATIONS POST CHER INSTITUTE

*This should be blank until after participation in the CHER Institute. Please include all manuscripts submitted (under review, not selected, and accepted). This sample uses APA formatting, but you may use the format that is correct for your discipline.*

#### Published

**1. Doe, J. P**. (2016) The Medical Home and the Prevention of Falls. *Journal of Aging,* 328(25):1847-1848. https://doi.org/10.1016/j.ahr.2016.100094

#### Submitted Awaiting Decision

**1.** Wu, K., **Doe, J. P.**, & White. A. (2016) Comparison of male and female fall rates, and frailty. *Journal of Aging,* 167(1):66-71. https://doi.org/10.1016/j.ahr.2016.100094

#### Submitted and Rejected or Under Revision

1. Smith, T., Doe, J.P., & Cline, W. (2022). Fall prevention for at risk seniors. Journal of Aging, 345(2):245-255. https://doi.org/10.1016/j.ahr.2016.100094

### PEER REVIEWED PUBLICATIONS POST TERMINAL DEGREE & PRE-CHER INSTITUTE

**1. Doe, J. P**. (2016) The Medical Home and the Prevention of Falls. *Journal of Aging,* 328(25):1847-1848. https://doi.org/10.1016/j.ahr.2016.100094

**2.** Wu, K., **Doe, J. P.**, & White. A. (2016) Comparison of male and female fall rates, and frailty. *Journal of Aging,* 167(1):66-71. https://doi.org/10.1016/j.ahr.2016.100094

## NATIONAL PRESENTATIONS

Epidemiology and Falls in the Elderly, 2010

The Medical Home and the Elderly, 2014 (invited presentation), 2011 (poster)

Transportation Cooperatives, 2018 (invited presentation)

## UNIVERSITY SERVICE:

2021-now General Education Governing Forum, Committee Member

2019-now Institutional Review Board, Committee Member

2019 Honors Thesis Advisor: Children with Disabilities Medical Homes and Social Economic Status

## LOCAL AND NATIONAL SERVICE

2019-2020 Member, Membership Committee, American Public Health Association

# Contact Information

|  |  |
| --- | --- |
| Legal Name: | Your legal name that is consistent with your name used on documents such as degrees or awards. |
| Preferred Name:  | Your preferred name you would like to be used in correspondence, publications within CHER, and Web postings.  |
| Preferred email | Email that you check most frequently for work related emails |
| Alternative email | Permanent email not attached to your current institution  |
| Cell phone number | Cell phone where you can be reached, even in the summer |
|  Ok to receive texts?  | Answer Yes or No |
| Alternative phone number  | Secondary phone number and type (home, work, 2nd cell phone) |
| Mailing address  | Mailing address where you are able to receive packages |
| Resident address | If different from mailing address |

# Summary of Eligibility

|  |  |
| --- | --- |
| Current Institution | Name of the current institution where you hold a tenure/tenure track (T/TT) position and are eligible to be a primary investigator.  |
| Current Appointment and Other Title(s)  |  |
| Is your Current Institution an MSI | Is the institution where you have a Tenure or Tenure Track position designated as a Minority Serving Institution (MSI) (Yes or No). If you are unsure of your institution’s status you may check here: <https://cmsi.gse.rutgers.edu/content/msi-directory> |
| Type of MSI  | If it is an MSI Please list: Historically Black Colleges and Universities (HBCU), Tribal Colleges and Universities (TCU), Hispanic Serving Institutions (HIS), or Asian American and Native American Pacific Islander Serving Institutions (AANAPISIs). ***Example:*** HBCU and AANAPISI |
| Year Completed Terminal Degree  | Year you completed your terminal degree, the most recent if you hold two such as MD and PhD***Example:*** 2020 |
| Terminal Degree Type and Field of Study  | Give the type of terminal degree (PhD, MD, DrPH, DSW, EdD, etc.) and the field of study. ***Example:*** DrPH in Environmental Health |
| NIH Awards  | List any and all NIH awards you have received and the year that you received them.***Example:*** R15 2019-2022  |
| Title or subject of proposed grant | ***Example:*** Comparative effectiveness of community support for adults with anxiety. |
| Current Mentoring programs | Are you currently participating in any formal mentoring programs? If so list and briefly describe.  |
| Letters of Recommendation  | Two letters of recommendation are required and should be submitted to CHER by your recommenders. Please provide us with your recommender’s name and email address.  |
|  | 1. |
|  | 2. |

# **Demographic Information**

*Used for the research component of the program, as required by the NIH, funder of the program*.

|  |  |
| --- | --- |
| Gender | Man/Male, Woman/Female, Non-binary/Gender Fluid  |
| Ethnicity | Are you Hispanic or Latino?  |
| Race(you may select more than one) | **Asian American Indian or Alaska Native;** **Black or African American; Native Hawaiian or other Pacific Islander; White; or Decline to Answer** or defer to answer until after application processed.**Other**: Please Specify  |
| Disadvantaged background | NIH also requires us to ask for demographic information regarding "disadvantaged background" defined as "individuals who come from a family with an annual income below established low-income thresholds and/or who come from a social, cultural, or educational environment such as that found in certain rural or inner-city environments that have demonstrably and recently directly inhibited the individual from obtaining the knowledge, skills, and abilities necessary to develop and participate in a research career."  Do you consider yourself to come from a disadvantaged background?Yes/No/Decline to Answer |
| Disability status  | NIH also requires us to ask for demographic information regarding "disability status,” defined as “having a physical or mental impairment that substantially limits one or more major life activities.” Do you consider yourself to have a disability that matches the NIH definition?Yes/No/Decline to Answer |
| Need for Accommodation | The CHER Institute is committed to providing access to all participants. Please list any accommodations you might need such as closed captioning, alternative text, or other.  |

# Proposed Research Summary

A **summary** of proposed research describing a pilot study that you would like to further develop as a potential grant proposal. The summary must include a brief discussion of the significance of the problem; proposed research question(s); any preliminary work; and the anticipated data collection methods. This project will be used to develop a Specific Aims page for an NIH proposal during the six-day Institute (not to exceed two pages double spaced or 750-800 words).  Note: The proposed project must be a community-engaged biomedical research with basic, clinical, or behavioral outcomes focused study aiming to eliminate health disparities among racial/ethnic minority populations.

Use the following Outline for your subject headings:

## Background/Significance

## Research Question(s)

## Methods (population, data collection, and analysis)

## Implications for Advancing Health Equity

# Quantitative and Qualitative Research Methods Experience

A description of previous training with qualitative and quantitative research methods, software, and analysis (one page, double spaced).