

Baylor College of Medicine  
Clinical Scientist Training Program  
Certificate of Added Qualification Application

**Deadline: May 1, 2019**

Name: \_\_\_\_\_ BCM ID#: \_\_\_\_\_  
Last, First Middle

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
City State/Country

Sex: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Visa Type: \_\_\_\_\_

Address: \_\_\_\_\_ Contact #: \_\_\_\_\_ Cell \_\_\_\_\_  
Work \_\_\_\_\_

Email: \_\_\_\_\_ Pager \_\_\_\_\_

Current Academic Appointment: \_\_\_\_\_

Department/Division: \_\_\_\_\_

Institution: \_\_\_\_\_ Year of fellowship completion: \_\_\_\_\_

Proposed Mentor: \_\_\_\_\_

Proposed Area of Research: \_\_\_\_\_

Departmental Commitment to Research and Salary Support: Yes No

**Combine application form with:**

1. A summary of proposed research, written by the student and the mentor, including significance, hypothesis and experimental approach (1-3 pages)
2. Letter of support from division chair OR section chief OR program director stating that you will have protected time to attend all classes and have time to conduct research (50 percent minimum recommended) – **sent directly by referee to [klevitt@bcm.edu](mailto:klevitt@bcm.edu)**
3. Letter of support from mentor, stating that he or she will attend the one-day annual CSTP retreat in February and participate in mentorship training (dates and times to be determined) – **sent directly by referee to [klevitt@bcm.edu](mailto:klevitt@bcm.edu)**
4. A one-page personal statement describing research experience, research and career goals, and how this program will help in reaching these goals
5. NIH-style biosketch
6. NIH-style biosketch of mentor.
7. List of mentor's research trainees for the past 15 years. Exclude clinical trainees.
8. A photo of yourself

**Send completed application form along with all application material to:** Kelly Levitt [klevitt@bcm.edu](mailto:klevitt@bcm.edu)