**Pediatric Injury Research Training Program Application**

Application Deadlines: November 1, 2021

**Name and Contact Information**

First name:

Last name:

Middle Initial:

Degree(s):

Your email address:

Daytime Telephone (with area code):

Evening Telephone (with area code):

Mailing Address:

**Current Professional Position**

Title:

Institution City:

Institution State:

Do you have a pending application for any other PHS mentored career development awards. This includes any pending awards (e.g., K07, K08, K22, K23 or any program that duplicates any of the provisions of the *KL2* program).

**Personal Statement**: Please provide the selection committee with a statement with the following sections. **Please limit this whole statement to one page with 1 inch margins and size 12 font**:

a. your interest in this program

b. your background and clinical research experience

c. your long-term career plans

d. how you will use the training program to advance your plans.

**Curriculum Vitae**: Please provide the selection committee with a current version of your curriculum vitae.

**Statement of Plans**

Please outline your plans in the event you receive this award. What didactic plans do you have? Please describe your research interests and potential research projects you would pursue, and specific mentors at the University of Washington you might work with, if you know them at this point. **This statement should be no longer than 2 pages, with 1 inch margins and size 12 font.**

Please list the individuals who will be submitting an evaluation form and letters of support on your behalf; 3 references are required. These should include letters from your current department chair or division chief, current residency program director (if applicable), and current research mentor (if applicable).

**References**

Please note that reference letters should be sent or emailed directly to Frederick P. Rivara, MD, MPH, Harborview Injury Prevention and Research Center, Box 359960, 325 Ninth Ave, Seattle WA 91804, email: fpr@uw.edu, fax: (206) 744-9962. Letters must be received by application deadlines.

Reference 1

Name:

Title:

Organization (include City, State, Country):

Reference 2

Name:

Title:

Organization (include City, State, Country):

Reference 3

Name:

Title:

Organization (include City, State, Country):

**Non-discrimination/Disability Access Policy**

University of Washington reaffirms its policy of equal opportunity regardless of race, color, creed, religion, national origin, sex, sexual orientation, age, marital status, disability, or status as a disabled veteran or Vietnam era veteran in accordance with University policy and applicable federal and state statutes and regulations. The University of Washington is committed to providing access, equal opportunity and reasonable accommodation in its services, programs, activities, education and employment for individuals with disabilities.

**Optional Diversity Information**

Consistent with our goal of enhancing the intellectual and social enrichment of the University community, the University of Washington actively seeks and welcomes applicants from diverse backgrounds. We are asked to maintain gender, ethnicity and disadvantage information for federal grants and other statistical purposes. Therefore, we would appreciate information about:

Gender:

Race and Ethnicity (Select all that apply):

Caucasian

Black/African American

Hispanic

American Indian or Alaska Native

Asian/Pacific Islander

Other