Application as Clinician Scientist

INDEEP – Inflammation-driven Dieseases Program

Applicant’s Details

**1. Applicant**

Name, title:

Date of birth:

Contact details:

Email: Telephone number:

Institution:

Possible starting date:

**2. Contract information**

Current position:

Pay scale grouping (e.g. TVÄ1S2):

[ ]  Full time / [ ]  Part-Time ( %)

Current contract length: until\* ; [ ]  permanent

(\*in case the contract ends before the end of the plannend INDEEP-funded 3-year program, the endorsement from the department/institute chair needs to be provided, see below)

**3. Institution or host clinic where the applicant ist currently employed**

Clinic / institution / department:

Head:

**4. Research cooperation partner (if apllicable):**

Name:

Conatact details: Telephone number

Email:

Instituion:

Project description

*Max. 5 pages total including figures and literature/citations (Arial 10, line spacing 1.15)*

1. Project title

**2. Summary**

*Please summarize your proposed project.*

**3. Background**

*Please provide a short overview on the published background of the project (1 page; literature in Arial 9, with line spacing 1; mark own publications).*

**4. Preliminary results**

*Please provide your preliminary results and contribution to the topic or the contribution of the institution you plan to work with (1-2 pages including figures, in case you have no own preliminary data, you are allowed to refer to data provided by xour host institute or published data form related projects; literature in Arial 9, line spacing 1; mark own publications).*

**5. Aims and work plan**

*Please describe the aims and planned methodology and workplan (max. 2 pages including tables). Please provide a realistic time table and financial plan for the 3 years. A budget of 10.000,00€ is included in the CS program with the expectation that additional consumables are provided by the host laboratory. Please provide a technology-based description of the research equipment you will need to succeed in your planned project. Finally, please provide an outlook with the long-term goals of the project beyond this INDEEP funding period (o.5 page).*

**6. Ethical requirements, animal testing and data protection**

*If applications to the ethics committee or animal testing applications are required for the implementation of the project, please indicate to what extent these have already been prepared, submitted or approved and submit a copy if applicable.*

**7. Cooperation**

*In this part, you should also elaborate with whom your project will be integratied with at the Goethe University and University Hospital Frankfurt as well as other possible cooperation partners.*

Attachments

*Please submit in English language as* ***one combined*** *PDF.*

**1. CV**

*Please list your education and work experience. Please do* ***not*** *include: photo, place of birth, marital status, religion, nationality. Please do not forget to sign your CV.*

**2. List of publications**

*Please provide your publication list (published or submitted), including impact factors. Please also add a list of possible conference contributions and the summary of your doctoral thesis.*

**3. List of funding and grants (if available)**

*Please list previous third-party funding (including amount of funding for all listed funds) and projects you have applied for.*

**4. Letter of motivation**

*Max. 2 pages in total.*

**5. Letter of support**

*Please provide a letter of support for the INDEEP-CS-Program form your* ***S-mentor´s*** *(science project mentor) accepting institute(s) and/or department(s) explaining how the independent research group of the candidate will be embedded and supported financially.*

**6. Letter of recommendation**

*Please provide a letter of recommendation from your current* ***C-mentor*** *(clinical mentor) for the INDEEP-CS-Program.*

**Declaration of the applicant**

I hereby confirm that this application has been written by myself, the information provided in this application is correct, and I have not used any sources other than those mentioned here.

Signature/Date Name (applicant)

**Endorsement of employer** ( internal candidates only, department, institute and research cooperation partner)

**1. How does the applicant fit the overall strategy of your Department / Institute?**

*(Integration into clinical concept)*

**2. Please describe in detail the long-term commitment of your Department / Institute towards the applicant**

*(including contract length, departmental funding, investments, laboratory space, research support, research personnel such as technician etc., clinical training support)*

I fully support the above application and hereby confirm that **Ms/Mr Dr. xxx** will be exempt from clinical practice for the time of her/his INDEEP research activities.

Signature/Date Name (head of clinic/institute)

Signature/Date Name (head of research cooperation partner)