**NIH StrokeNet RCC Individualized Educational Training Plan**

***Date:***

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| **RCC Name:** | | **RCC Principal Investigator(s):** | |
| **Trainee Name:**  (Include degrees, MD, PhD, etc.) | | | |
| **Gender:** | | **\*Underrepresented: (If yes, list Race/Ethnicity or disabled)** | |
| **Department & Discipline:** (i.e. neurologist, neurosurgeon, physical therapist, etc.): | | **Level of Trainee: (**non-MD trainee, Fellow, Junior Faculty, Faculty) | |
| **Phone:** | **E-mail address:** | | **Additional E-mail:** |
| **Will This be Your Primary E-mail Address for the Training Year?** **Yes No**  **If not please send to Jeanne as soon as available.** | | | |
| **Research Interest:** | | | |
| **% of Protected Time for Research and StrokeNet Activities:** | | | |
| **Mentor(s):** | | | |
| **Off Site Mentor Request and or Rotation Request:** | | | |
| **Rotation Schedule:** Please list the following:  MD’s (a.) Months of inpatient/ICU (b.) Months of other clinical rotations (list) (c.) Outpatient clinic frequency (d.) acute stroke call or other types of call and how often. Include weekly block schedule if possible.  **Block Rotations –** For Physician Scientists   |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Jul** | **Aug** | **Sep** | **Oct** | **Nov** | **Dec** | **Jan** | **Feb** | **Mar** | **Apr** | **May** | **Jun** | | *Name of Rotation – (Do not write in this area)* | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  | | *# Clinics per Week – (Do not write in this area)* | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  | | *# Stroke Calls per Month – (Do not write in this area)* | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  | | *Other Clinical Activity – (Do not write in this area)* | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |   Clinicians: Describe any other clinical duties and how often these duties will be performed. | | | |
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| |  | | --- | | **Planned Research Project:**  Have a specific project that your trainee will work on. If you aren’t sure yet, provide 1-2 examples of possible projects that the trainee is interested in. | |  |  |  | | --- | | **Planned Coursework:**  Please consider inclusion of coursework in responsible conduct of research (ethics), particularly for work that involves human subjects. Unfortunately, no funds are available through StrokeNet to support coursework. | |  |   **Training Plan:** **If Applying for 2nd Year Funding Describe Accomplishments During the First Year, Including Published Manuscripts and Presented Abstracts**  Each trainee must spend at least 50% of his or her time on research. (Weekends and evenings should not be counted toward research time.) Please include a specific mentoring plan, milestones, and goals (for example, obtain IRB approval, database development, abstract submission, etc.). Please also list any planned grant writing workshops, seminars, research conference attendance, workshops. | | | |
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| **Trainee Publications From Last Two Years:**  (List full Citations) |
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\* For the NIH policy’s related to diversity go to the links below.

<http://www.ninds.nih.gov/diversity_programs/definitions.htm>

<https://www.nigms.nih.gov/Training/Diversity/Pages/Approaches.aspx>

<https://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-089.html>