The Duke/NCCU BIRCWH Program is a K12 institutional career development grant funded by the NIH Office of Research in Women’s Health currently administered by NICHD. The goal of the program is to provide training and education in all aspects of research pertaining to women’s health for junior faculty members. To be eligible, the applicant should be conducting research applicable to women’s health with an emphasis on a multidisciplinary approach. The purpose of the BIRCWH is to promote interdisciplinary research and transfer findings that will benefit the health of women, as well as research involving sex/gender similarities or differences in biology, health or disease.

The BIRCWH Program provides advanced training, mentoring, and career guidance for junior faculty leading to an independent interdisciplinary scientific career. BIRCWH research spans the entire spectrum of Women’s Health topics, and the program is open to all types of disciplines, clinicians and non-clinicians.

The Duke PI of this career development grant is Dean Nancy Andrews, MD, PhD, and the program is managed by Amy Murtha, MD, Professor, and Vice Chair for Research, Department of Obstetrics and Gynecology. Questions about the program or the application process can be directed to:

Amy P. Murtha, MD (Research Director)  Friederike L. Jayes, DVM PhD (Program Coordinator)
e-mail: murth002@mc.duke.edu  e-mail: friederike.jayes@duke.edu
Phone: 919-684-5836  Phone: 919-668-3973

Underrepresented Minorities are encouraged to apply. Duke University offers equal opportunity to all applicants without regard to race, color, creed, sex, age, handicaps or national origin. The questions concerning race, sex and national origin on the application form are for the purpose of meeting Federal reporting requirements.

BIRCWH Scholars Award
The Duke/NCCU BIRCWH anticipates funding 1 new BIRCWH Scholar starting June 1, 2016. Beginning on the funding start date, BIRCWH scholars must dedicate 75% of full professional effort (9 person months; 6 person months for surgical specialties) to research and career development activities related to their BIRCWH project. The BIRCWH program will pay 75% of salary, up to a $100,000 maximum, with a commitment of at least 2 years and up to 5 years of funding (contingent on annual review). The BIRCWH award also includes limited funds for research support and travel. The scholar’s department has to be committed to support the scholar in their research and career development.

Awardees will be expected to publish their work and submit an application for independent funding (Independent K, R01 or similar) as soon as possible within the funding period. Each scholar will work closely with at least two mentors with extensive research experience, one of whom is outside of their primary field. At least one mentor must be from the approved mentors list (BIRCWH.medschool.duke.edu). Additionally, all BIRCWH scholars are expected to participate in Scholar meetings, mentor meetings, and professional development activities.
Eligibility
Junior faculty (i.e., Assistant Professor or Medical Instructor) at Duke in any department interested in pursuing interdisciplinary research careers related to women’s health may apply to the BIRCWH program. Fellows and post-docs may apply with a letter stating that they will have a faculty appointment by the first date of their award which is not contingent on their receipt of BIRCWH funding.

The following eligibility requirements apply:
1. Clinical doctorate, PhD, or equivalent;
2. Have recently completed any postgraduate training (including clinical or postdoctoral fellowship training, or residency if they have chosen not to subspecialize);
3. Have no more than six years of research or research training experience beyond their last doctoral degree (usually PhD or completion of residency). However, in order to accommodate the needs of those interested in participating in this program that may have had a career hiatus because of family responsibilities, uniformed service, etc., there is no limit on time elapsed since completion of training;
4. United States citizenship or permanent residency.
5. Not be or have been a PD/PI on an R01, R29 or subproject of a Program Project (P01), Center (P50, P60, U54) grant, or independent mentored career development (K-series) grants, or other equivalent research grant awards; except for R03 and R21;

The proposed research may be either a new application or a revision of a previous BIRCWH application. If a revised application is submitted the applicant must include a description of the progress completed on the research project dating from the previous submission date to the current application date. In addition, if a revised application is submitted please include copies of any manuscripts that have resulted from the research conducted.

Letter of Intent
All individuals wishing to apply for the BIRCWH Program must submit a letter of intent by 25 April, 2016. The letter of intent should be e-mailed to Amy Murtha at obgyngants@duke.edu.

The letter of intent must include the following information:
1. Applicant’s full name
2. Degree(s) and date(s) awarded (If MD, then also include when you finished residency)
3. Department, Division, School
4. Academic rank and position
5. NIH Biosketch
6. Project Title and two-sentence description of the research project
7. Brief description of the planned project (no more than one page)
8. Brief description of professional development goals (no more than one page)
9. Proposed mentors, at least one of whom is from the attached list of approved mentors (see website: BIRCWH.medschool.duke.edu)
Applications
We will contact you within 5 business days of receiving your Letter of Intent to let you know if you are eligible to submit a full application.

All components of the application must be submitted by e-mail as Word or PDF documents by 13 May, 2016.
All application materials should be e-mailed to Amy Murtha (obgyngrants@duke.edu)

The application must include the following:
1. Completed application form (see attached)
2. NIH Biosketch (New format)
3. Current curriculum vitae
4. Project title and a two-sentence description of the research project
5. A personal statement (2 pages max) that includes:
   a. Description of long-term career goals,
   b. Professional development plan: Description of career development goals (include course work, training, etc.) for the next 2-3 years. Describe how your mentors will support you in your career development endeavors.
   c. Description of how the BIRCWH program will help meet your career and professional development goals, and
   d. Plan for securing 75% protected research time and explanation of commitments for your 25% non-BIRCWH time.
6. A brief research proposal (2-3 pages plus references) for a specific project to be accomplished during the term as a BIRCWH scholar. Describe how your mentors will support you in your research endeavors.
7. Name at least two mentors
   (at least one must be from the BIRCWH mentor list BIRCWH.medschool.duke.edu).
   List their names, degree(s), academic ranks, affiliation (Department, Division, School), and their disciplines/fields. Attach a letter of agreement/support from each proposed mentor.
8. Two letters of support/evaluation written by persons knowledgeable about your prior accomplishments and suitability for this program.
   One letter should come from your Department Chair or Division Chief indicating their agreement to designate 75% of your full professional effort towards BIRCWH-related research, and specifying steps that will be taken to assure this protected time.

Letters of recommendation and letters from mentors may be faxed to Ellen Brearley at (919) 668-0295, delivered to Room 211, Baker House, Duke South, or emailed to Amy Murtha (obgyngrants@duke.edu).

Potential applicants are encouraged to speak with program leadership (Amy Murtha or Friederike Jayes) to determine eligibility and mentor selection.
Duke/NCCU BIRCWH Application Form

1. Last or Family Name ____________________________________________
   First ___________________________ Middle ___________________________
   Preferred ___________________________
   Gender: Female ☐ Male ☐

2. Country of Citizenship __________________________________________
   If not US citizen, type of visa you hold __________________________________

3. Ethnic category ☐ Hispanic ☐ Not Hispanic ☐ Decline to respond

4. Racial category ☐ American Indian/Alaska Native ☐ Asian
   ☐ Native Hawaiian or other Pacific Islander ☐ Black or African American
   ☐ White ☐ Decline to respond

5. Departmental/ Division Affiliation __________________________________

6. Academic Rank and Title __________________________________________
   Position ________________________________________________________

7. Work Telephone Number: ____________________ E-mail address: __________
   Mailing Address: __________________________________________________
   Number and Street ___________________________ City __________ State
   __________ Zip Code

8. Pager Number ___________________________
   Cell Phone Number ___________________________
9. List in chronological order all post-secondary colleges and universities attended:

<table>
<thead>
<tr>
<th>Degree or Institution Diploma</th>
<th>Location</th>
<th>From – Through</th>
<th>Field of Study</th>
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10. List in chronological order all residency, fellowship, or postdoctoral training institutions:

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<th>Institution/Location</th>
<th>Position</th>
<th>From – Through</th>
<th>Field of Study</th>
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11. Do you have specialty boards?  
   - Yes  
   - If Yes, Specialty
   - No

12. List two individuals who will supply letters of recommendation.

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<th>Name</th>
<th>Position</th>
<th>Institution/Department</th>
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13. List at least two mentors for your research project (see website for list of approved mentors - BIRCWH.medschool.duke.edu - at least one must be from this list). Note: Mentors also need to supply letters of recommendation.

<table>
<thead>
<tr>
<th>Mentor Name</th>
<th>Department/Division/Discipline</th>
<th>On approved mentors list (Yes/No)</th>
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14. I hereby certify that the information given by me in this application and attached statements is complete and correct to the best of my knowledge.

__________________________  ____________________
Signature                  Date
Letter of Support/Evaluation-BIRCWH
Duke/NCCU Building Interdisciplinary Research Careers in Women’s Health Program

Applicant Name:

Last or Family Name   First   Middle

Your Name:

Last   First   Degree(s)   Academic Ranks, Position

Department/Division   School   Institution

Discipline/Field of Research

The Building Interdisciplinary Research Careers in Women’s Health Program would appreciate a candid statement from you concerning the applicant named above. Please use the space below (or an attached letter if you prefer) to comment on the applicant’s accomplishments, abilities, character and capacity for success as a candidate in this program. It would be helpful for us to know how long, and in what connection, you have known the applicant. If the letter is being written by the applicant’s Department Chair or Division Chief, the letter should indicate agreement to designate 75% of the applicant’s full professional effort towards research, and specify steps that will be taken to assure this protected time.

Letters of support/evaluation are due to the Program office by May 13, 2016.
Mail to: BIRCWH Program c/o Amy Murtha obgyng@duke.edu
or Fax to: BIRCWH Program c/o Ellen Brearley at (919) 668-0295