Call for Applications
K12 Urologic Career Development Program (KURe)

The Duke Multidisciplinary K12 Urologic Career Development Program (KURe) seeks to recruit talented MDs, PhDs, and MD/PhDs from diverse disciplines that are interest in benign urological diseases and are interested to develop the skills necessary to initiate and sustain an independent research career in benign urological research. KURe scholars will receive career development training and support to develop the skills necessary to become outstanding independent investigators able to lead multidisciplinary research teams. Research areas supported by this initiative must be related to the mission of the NIDDK.

Questions about the program or the application process can be directed to:

Cindy L. Amundsen, M.D. (PI and Program Director)
Email: cindy.amundsen@duke.edu

Friederike L. Jayes, DVM PhD (Program Coordinator)
Email: friederike.jayes@duke.edu
Phone: 919-668-3973

Mimi Coker (Grants Manager)
Email: mimi.coker@dm.duke.edu
Phone: 919-684-3608

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 this application form are for the purpose of meeting Federal reporting requirements.

KURe Scholars Award
Beginning on the funding start date, KURe scholars must dedicate 75% of full professional effort (9 person months) 50% of full professional effort for surgical specialties (6 person months) to research and career development activities related to their KURe project. The KURe will pay 75% of salary (50% if a surgical specialty) up to $140,000 per year. The program also provides support for research related activities, tuition related to didactic courses or career development and travel to research meetings.

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. Additionally, all KURe scholars are expected to participate in in research and professional development activities, including KURe specific activities organized by the Program Director.

Eligibility
MDs, PhDs and MD/PhDs in any department interested in pursuing a urological research career may apply to the KURe program. Scholars should have no more than five years of postdoctoral research experience and not more than 10 years should have elapsed since receiving the terminal doctoral degree. Mid-career and senior faculty are not eligible. Scholars must be a US citizen or have a valid green card.
**Letter of Intent**

All individuals wishing to apply for the KURe Program must submit a letter of intent. The letter of intent should be e-mailed to Cindy L. Amundsen at cindy.amundsen@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 with residency, 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 mentor(s), at least one of whom is from the list of approved mentors
   (see website: [KURe.medschool.duke.edu](http://KURe.medschool.duke.edu))

**Applications**

You will receive notification when to submit a full application

All components of the application must be submitted by e-mail as Word or PDF documents. All application materials should be e-mailed to Cindy L. Amundsen at cindy.amundsen@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 KURe 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-KURe time.
6. A brief research proposal (2-3 pages) for a specific project to be accomplished during the term as a KURe 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 KURe mentor list) (see website: [KURe.medschool.duke.edu](http://KURe.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 (in addition to proposed mentors) 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 KURe-related research, and specifying steps that will be taken to assure this protected time.

Potential applicants are encouraged to speak with program leadership to determine eligibility and mentor selection.
Application for K12 Urologic Career Development Program (KURE)

Please complete this form using the PDF Typewriter Tool

Duke KURE 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>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10. List in chronological order all residency, fellowship, or postdoctoral training institutions:

<table>
<thead>
<tr>
<th>Institution/Location</th>
<th>Position</th>
<th>From – Through</th>
<th>Field of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

11. Do you have specialty boards?  
   - Yes
   - No

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Institution/Department</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. List at least two mentors for your research project (see website for list of approved mentors: KURe.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>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 ___________________________
Applicant Name:

<table>
<thead>
<tr>
<th>Last or Family Name</th>
<th>First</th>
<th>Middle</th>
</tr>
</thead>
</table>

Your Name:

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Degree(s)</th>
<th>Academic Ranks, Position</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Department/Division</th>
<th>School</th>
<th>Institution</th>
</tr>
</thead>
</table>

Discipline/Field of Research

The **KURe** 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.*

Mail to: Cindy L. Amundsen, M.D. (Program Director); Email: [cindy.amundsen@duke.edu](mailto:cindy.amundsen@duke.edu)