

OLD DOMINION UNIVERSITY

U-RISE TRAINEESHIP PROGRAM APPLICATION

Undergraduate Research Training Initiative for Student Enhancement (U-RISE)

Application Deadline: Monday, March 31, 2025 at 11:59 p.m., EST

The goals of the NIH-funded Monarch U-RISE program are to increase the number of Ph.D. scientists from underrepresented groups who are engaged in biomedical research and to prepare them for research careers. More information about the U-RISE program can be found at the following URL:

https://nigms.nih.gov/training/RISE/Pages/U-RISE-T34.aspx

U-RISE applicants must be interested in pursuing either a Ph.D. or a Ph.D./M.D. degree in subjects in the Colleges of Engineering, Health Sciences, and Sciences, be a full-time student at ODU with a junior standing beginning fall 2025, and must be underrepresented in the sciences for ONE of the following reasons:

- ς–Black/African-American, Native Hawaiian/other Pacific Islander, Hispanic/Latino, Native American/Alaskan Native
- Ω -Financially disadvantaged (eligible for Pell grants or equivalent)
- Ξ-Disability recognized by the ODU Office of Educational Accessibility

APPLICATION INSTRUCTIONS

- 1. Please read all directions carefully.
- 2. Complete the ODU U-RISE Application. Please fill it out online, print; then sign the form with a pen, scan the signed document, and submit per instructions below. Your essays must be typed with text confined to the space provided by the form. Please be concise. Please contact Prof. Holder (e-mail: aholder@odu.edu), Prof. Ranjan (e-mail: dranjan@odu.edu) with any questions or for assistance with your application.
- 3. Complete the ODU Admissions Application, if necessary.
- 4. Give the Recommendation Forms to two professors or research mentors in the Colleges of Engineering, Health Sciences, or Sciences, who can give insight to your potential to pursue either a Ph.D. or a Ph.D./M.D. degree. You must allow adequate time for each recommender to complete the form and return it to Prof. Alvin Holder. The completed Recommendation Form should be returned by e-mail to aholder@odu.edu.
- 5. Please return all application materials to the U-RISE Program Director, Prof. Alvin Holder (e-mail: aholder@odu.edu) by Monday, March 31, 2025 at 11:59 p.m., EST. Please see checklist below.

Checklist

☐U-RISE Application (four pages) ☐Statement of Educational Goals and Research Interests	
□Recommendation Form #1 and Recommendation Form #2 (sealed envelopes with	signature on flap)**
May also be emailed.	
□Official Transcript(s) from all colleges attended before enrolling at ODU.**	Also, please provide unofficial
ODU transcripts.	
□Citizenship documentation	
□Resume or CV	

**may be mailed to the Director: Alvin Holder, Ph.D.

Prof. Alvin Holder Old Dominion University Department of Chemistry and Biochemistry 4501 Elkhorn Avenue Norfolk Virginia 23529

PLEASE NOTE: You will be notified by Prof. Holder as to the outcome of your application. Top applicants will be interviewed and U-RISE trainee decisions will be announced after final interviews. Successful applicants must complete and sign a Scholarship Agreement. Proof of citizenship (copy of a United States birth certificate) or permanent residency (copy of "green card") is required prior to official acceptance into the program. Official appointments are completed on the NIH website, with the assistance of the ODU U-RISE staff. You can also view the following URL: https://nigms.nih.gov/training/RISE/Pages/U-RISE-T34.aspx.



Please let us know how you heard about the U-RISE Traineeship Program:

Email from faculty or advisor
E-mail from fellow student
Web page
Facebook
Flyer
Other

ODU U-RISE PROGRAM TRAINEE APPLICATION

Please type or print neatly

Last Name	First Na	First Name Middle Init		tial	
ODU Student ID Number	Male	Female	Other	Date of Bi	rth
Campus Address					
Campus Phone #		Cell Phone			
Permanent Address					
Permanent Phone Number _	_	E-mail _			
Year of Graduation Name and I	Full Address of High S	School	Country		
	/ mm/yy S.				
st all SAT/ACT exam dates_					
List all colleges and unive	ersities attended:				
Collogo/Uni	iversity	Majo	ar .	Cum GPA	GPA in Major
Conege/Oni	Versity	Iviajo	01	Culli Of A	OFA III Majoi
Are you currently enrolled	at ODU?			Yes	No
If No, have you submitted a	ın ODU Admission ar	oplication?		Yes	No
Do you have ODU campus	housing secured for F	fall 2025?			
Are you eligible for a Pell (Grant?			Yes	No
Are you the first member of your family to attend		d aallaga?		Yes	No
Are you the first member of	i your raining to attend	u conege?		Yes	No
Do you have a disability? If yes, give a brief description (e.g., vision, hearing, etc.)		Yes	No		
Answer:					
Racial Background: (chec	k one or more)				
American Indian or A	laskan Native		Black o	or African Ame	erican
Native Hawaiian or or			White		
Asian			Asian/I	ndian	
Other:					
Are you Hispanic (or La			Yes	No	

Citizenship Information

a.	Are you a citizen of the United States of America? Y (A photographic copy of your birth certificate or passport w required with this application.)	es ith a state	No -issued	photo identification card is
b.	If you are not a U.S. Citizen, are you a Permanent Resident with Yes No Photographic copies of both sides of			•
c.	I believe that I am a U.S. Citizen or Permanent Resident of the Udocumentation. Yes No This situation (c) will require additional investigation. You must Citizenship Status and permission from you, the student, and your for ODU to look into your status. Please note that there are a lim RISE Program at ODU and any delay in proving your citizenship into the U-RISE at ODU. Therefore, ODU and its staff take no repotential program support because of related delays.	provide a r guardian, ited numb status may	written of applicer of app	explanation of your U.S. cable, and any legal counsel cointments available to the U-ely impact your acceptance
	list the name, address, and telephone number (other than the address n be used as a secondary contact for you:	ess listed a	above) of	f a relative, or other person
Do you	have outstanding federal student loans? Yes No			If yes, please explain:
Have	you ever received NIH funding? Yes No			
If yes,	name program and dates of participation (U-RISE, MIRT, etc.).			
	plan to pursue either a Ph.D. or a Ph.D./M.D. degree after a B.S./B.A. degree?	Yes]	No
Enginee	plan to pursue a career in subjects in the Colleges of bring, Health Sciences, or Sciences after earning either a Ph.D. D./M.D. degree?	Yes		No

PLEASE ANSWER THE ESSAY QUESTIONS IN THE SPACE PROVIDED

	1. Why do you believe that a biomedical career in your major in the Colleges of Engineering, Health Sciences,
	or Sciences is right for you? Please complete up to 98% of the allotted space here and for # 2 below.
2.	How will the ODU U-RISE Program assist in your development as a future research scientist?

STATEMENT OF EDUCATIONAL GOALS AND RESEARCH INTERESTS

Date	ate ODU Student ID Number		
Last Name	First Name	Middle Initial	
Please write a brief statement: (for pursuing these goals. Please		al goals and (2) reasons and motivation	

The information provided here is accurate to the best of my knowledge.

Signature of the applicant:

Date:

LETTERS OF RECOMMENDATION

(Please note: Two letters of recommendation are required)

To be completed by a professor or research mentor from the Colleges of Engineering, Health Sciences, or Sciences, who can give insight to the potential success of the applicant in pursuit of either a Ph.D. or a Ph.D./M.D. degree, or a biomedical Ph.D. degree-seeking research career.

	e e-mail your recomme er@odu.edu.	ndation to Prof. Alvin Holder, Director, U-RISE Program at e-mail:
Appli	cant's Name:	
1.	How do you know the	applicant?
2.	Program - a program	aracteristics which make this student an outstanding candidate for ODU's U-RISE dedicated to the preparation of underrepresented undergraduates for Ph.D. programs in the Biomedical Sciences. (Please attach the evaluation on your
		ut the U-RISE traineeship program, please see: hing/RISE/Pages/U-RISE-T34.aspx
		Application Deadline: Monday, March 31, 2025, 11:59 p.m., EST
		Title:
		Institution:
		Telephone Number:

THANK YOU FOR YOUR SUPPORT OF THE U-RISE PROGRAM AT ODU.

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Please e-mail your recommendation to Prof. Alvin Holder, Director, U-RISE Program at e-mail:

aho	lder@odu.edu.			
App	olicant's Name:			
1.	How do you know the ap	plicant?		
2.	Please describe the characteristics which make this student an outstanding candidate for the U-RISE Program - a program dedicated to the preparation of underrepresented undergraduates for Ph.D. program and research careers in the Biomedical Sciences. (Please attach the evaluation on your stationery.)			
		ne U-RISE traineeship program, please see: /RISE/Pages/U-RISE-T34.aspx		
		Application Deadline: Monday, March 31, 2025 at 11:59 p.m., EST		
	Your Name:	Title:		
	Department:	Institution:		
		Talanhana Numbar		
	Signature	Telephone Number:		

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