

Application for Full/Associate Membership Holden Comprehensive Cancer Center at The University of Iowa -

Name: (Last) _____ (First) _____ (MI) _____

Department/Division: _____

Degree(s): _____

Title(s): _____

Mailing Address (Room & Bldg): _____

Telephone: _____

Email Address: _____

Affiliation (e.g. College, Department, etc.): _____

ORCID required for Full+Associate Membership*:

***If you do not have an ORCID please create one here: <https://guides.lib.uiowa.edu/ORCID>**

Areas of Interest:

Research Programs [Full/Associate Membership]

_____ Cancer Genes and Pathways Program CGP

[Leaders: Drs Dodd/Quelle; Asst Leader: Dr Talbert]

- Determine mechanisms of tumor evolution and metastasis.
- Characterize tumor immunology and microenvironment.
- Define mechanisms of therapy response and resistance in tumors.

_____ Experimental and Redox Therapeutics ERT

[Leaders: Drs Menda, Simons-Burnett, Spies; Asst Leader: Dr Thiel]

- Advance approaches that exploit vulnerabilities in tumors, target redox pathways, and preserve normal tissue function.
- Evaluate innovative therapeutic, drug delivery, and theranostic strategies using state-of-the-art model systems.
- Translate preclinical discoveries into clinical trials and support their commercialization.

_____ Cancer Epidemiology & Population Science CEPS

[Leaders: Drs Charlton/Vander Weg; Asst Leader: Dr Gorzelitz]

- Conduct etiologic research on genetic, environmental, lifestyle, and contextual risk factors.
- Develop, implement, and disseminate novel approaches for primary and secondary prevention.
- Improve the experience of patients during treatment and post-treatment survivorship.

Clinical Focus-HCCC MOGs

- | | |
|---|--|
| <input type="checkbox"/> Breast | <input type="checkbox"/> Melanoma |
| <input type="checkbox"/> Gastrointestinal | <input type="checkbox"/> Myeloma |
| <input type="checkbox"/> Genitourinary | <input type="checkbox"/> Neuro-Oncology |
| <input type="checkbox"/> Gynecologic | <input type="checkbox"/> Neuroendocrine |
| <input type="checkbox"/> Head & Neck | <input type="checkbox"/> Pediatrics |
| <input type="checkbox"/> Hematopoietic Stem Cell Transplant | <input type="checkbox"/> Sarcoma |
| <input type="checkbox"/> Leukemia | <input type="checkbox"/> Thoracic Cancer |
| <input type="checkbox"/> Lymphoma | |

Briefly state your current specific area of scientific interest or expertise:

Describe your research interest and a description of cancer research activities:

Please provide a brief description of your plans to obtain support, including external funding, for your cancer research: