



College of Public Health and Health Professions
Department of Clinical and Health Psychology

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May 24, 2012

Re: T32 AG 020499

To Whom It May Concern

Attached, please find a resubmission of my competing renewal application of the predoctoral training grant T32 AG 020499 entitled, "Physical, Cognitive and Mental Health in social Context." This predoctoral training program has been funded by the National Institute on Aging, NIA.

Thank you,

A handwritten signature in black ink that reads 'Michael Marsiske'.

Michael Marsiske ,PhD
Associate Professor
Department of Clinical & Health Psychology

SF 424 (R&R)

1. * TYPE OF SUBMISSION		2. DATE SUBMITTED	Applicant Identifier
☐ Pre-application ☒ Application ☐ Changed/Corrected Application		3. DATE RECEIVED BY STATE	State Application Identifier
		4. a. Federal Identifier AG020499	b. Agency Routing Number
5. APPLICANT INFORMATION * Organizational DUNS:969663814			
* Legal Name: University of Florida Board of Trustees Department: Division: * Street1: 219 Grinter Hall Street2: PO Box 115500 * City: Gainesville County/Parish: Alachua * State: FL: Florida Province: * Country: USA: UNITED STATES * ZIP / Postal Code: 32611-5500			
Person to be contacted on matters involving this application Prefix: * First Name: Middle Name: * Last Name: Suffix: Mr Brian Prindle * Phone Number: 352-392-1582 Fax Number: 352-392-4400 Email: ufproposals@ufl.edu			
6. * EMPLOYER IDENTIFICATION NUMBER (EIN) or (TIN): 1-596002052-A1		7. * TYPE OF APPLICANT H: Public/State Controlled Institution of Higher Education	
8. * TYPE OF APPLICATION: ☐ New ☒ Resubmission ☐ Renewal ☐ Continuation ☐ Revision		Other (Specify): Small Business Organization Type ☐ Women Owned ☐ Socially and Economically Disadvantaged	
If Revision, mark appropriate box(es). ☐ A. Increase Award ☐ B. Decrease Award ☐ C. Increase Duration ☐ D. Decrease Duration ☐ E. Other (specify):		9. * NAME OF FEDERAL AGENCY: National Institutes of Health	
* Is this application being submitted to other agencies? ☐ Yes ☒ No What other Agencies?		10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: TITLE:	
11. * DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Physical, Cognitive, and Mental Health in Social Context			
12. PROPOSED PROJECT: * Start Date * Ending Date 05/01/2014 04/30/2019		13. CONGRESSIONAL DISTRICT OF THE APPLICANT: FL-003	
14. PROJECT DIRECTOR/PRINCIPAL INVESTIGATOR CONTACT INFORMATION			
Prefix: * First Name: Middle Name: * Last Name: Suffix: Michael Marsiske Position/Title: Associate Profe * Organization Name: University of Florida Board of Trustees Department: HP-CLINICAL / HLTH PSYCHOLOGY Division: COLLEGE-PUBL HLTH / HLTH PROFS * Street1: Department of Clinical and Health Psycho- Street2: PO BOX 100165 logy HPNP Room * City: GAINESVILLE County/Parish: Alachua * State: FL: Florida Province: * Country: USA: UNITED STATES * ZIP / Postal Code: 32610-0165 * Phone Number: 3522735097 Fax Number: 8017205897 * Email: marsiske@php.ufl.edu			

15. ESTIMATED PROJECT FUNDING		16. * IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. * Total Federal Funds Requested \$1,662,411.00		a. YES ☐ THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:	
b. Total Non-Federal Funds \$0.00		DATE:	
c. * Total Federal & Non-Federal Funds \$1,662,411.00		b. NO ☒ PROGRAM IS NOT COVERED BY E.O. 12372; OR	
d. * Estimated Program Income \$0.00		☐ PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
17. By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances * and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001) ☒ * I agree * The list of certifications and assurances, or an Internet site where you may obtain this list, is contained in the announcement or agency specific instructions.			
18. SFLLL or other Explanatory Documentation. File Name: Mime Type:			
19. Authorized Representative			
Prefix:	* First Name:	Middle Name:	* Last Name: Suffix:
Mr	Brian		Prindle
* Position/Title: Associate Director		* Organization Name: University of Florida Board of Trustees	
Department: Office of Research		Division: Division of Sponsored Research	
* Street1: Division of Sponsored Research		Street2: 219 Grinter Hall	
* City: Gainesville		County/Parish: Alachua	* State: FL: Florida
Province:	* Country: USA: UNITED STATES		* ZIP / Postal Code: 32611-5500
* Phone Number: 352-392-1582		Fax Number: 352-392-4400	* Email: ufproposals@ufl.edu
* Signature of Authorized Representative		* Date Signed	
20. Pre-application File Name: Mime Type:			

Project/Performance Site Location(s)

Project/Performance Site Primary Location

Organization Name: University of Florida Board of Trustees
* Street1: PO Box 115500 Street2: 219 Grinter Hall
* City: Gainesville County: Alachua * State: FL: Florida
Province: * Country: USA: UNITED * Zip / Postal Code:
STATES 32611-5500
DUNS Number: 969663814 * Project/Performance Site Congressional District: FL-003

	File Name	Mime Type
Additional Location(s)		

RESEARCH & RELATED Other Project Information

1. * Are Human Subjects Involved? ☐ Yes ☒ No		
1.a. If YES to Human Subjects Is the Project Exempt from Federal regulations? ☐ Yes ☐ No If yes, check appropriate exemption number Exemption Number: 1 2 3 4 5 6 If no, is the IRB review Pending? ☐ Yes ☐ No IRB Approval Date: Human Subject Assurance Number		
2. * Are Vertebrate Animals Used? ☐ Yes ☒ No		
2.a. If YES to Vertebrate Animals Is the IACUC review Pending? ☐ Yes ☐ No IACUC Approval Date: Animal Welfare Assurance Number		
3. * Is proprietary/privileged information ☐ Yes ☒ No included in the application?		
4.a. * Does this project have an actual or potential impact on the environment? ☐ Yes ☒ No		
4.b. If yes, please explain:		
4.c. If this project has an actual or potential impact on the environment, has an exemption been authorized or an environmental assessment (EA) or environmental impact statement (EIS) been performed? ☐ Yes ☐ No		
4.d. If yes, please explain:		
5.a. * Is the research performance site designated, or eligible to be designated, as a historic place? ☐ Yes ☒ No		
5.b. If yes, please explain:		
6.a. * Does this project involve activities outside the U.S. or partnership with International Collaborators? ☐ Yes ☒ No		
6.b. If yes, identify countries:		
6.c. Optional Explanation:		
7. * Project Summary/Abstract	Project_Summary1002950717.pdf	Mime Type: application/pdf
8. * Project Narrative	Project_Narrative1002950718.pdf	Mime Type: application/pdf
9. Bibliography & References Cited	Not_applicable1003165888.pdf	Mime Type: application/pdf
10. Facilities & Other Resources	Resources_Environment1003165803.pdf	Mime Type: application/pdf
11. Equipment	Not_applicable1003165804.pdf	Mime Type: application/pdf

Project Summary/Abstract

This competitive renewal application requests continuation of a predoctoral training program at the University of Florida (UF), which was first funded in 2003. The purpose of this program, consistent with the chief goal of gerontology/geriatrics, is to train predoctoral researchers in strategies related to: (a) identifying potential antecedents of functional independence in older adults, and (b) designing and evaluating interventions that may prevent disability. Secondly, for those elders who have already experienced substantial loss of function, this predoctoral training program focuses on identifying policies and practices that may reduce negative consequences and iatrogenic effects of treatment. Acute events like stroke, hip fracture, and chronic conditions including circulatory and cardiovascular disease, diabetes, osteoarthritis and cognitive impairment all constitute widely studied precursors of disability and also represent potentially modifiable factors to reduce progression down the disability pathway. Informed by major theories of functional independence, we aim to prepare predoctoral trainees for postdoctoral fellowships and subsequent research placements in settings including traditional disciplinary departments, clinical research environments, and multidisciplinary gerontology programs. With the co-location and collaboration between UF's health science and liberal arts campuses, UF is uniquely positioned to offer training in the biopsychosocial components of independence, as well as health care, technology, and policy aspects of care for aged persons with disability. Disciplines represented in this proposal include applied physiology and kinesiology, geriatric medicine, linguistics, neurology, neuropsychology, neuroscience, nursing, occupational therapy, psychology, sociology, and speech pathology. Core program components include (1) assignment of each student to a frequently convened multi-disciplinary mentoring team (2) formation and close tracking of productivity goals in the areas of research, education, and service ; (3) a weekly campus-wide colloquium series featuring top national speakers, local researchers in aging, and professional development; (4) required supplemental coursework and other didactics in Aging and Statistics/Methodology, as well as Responsible Conduct of Research. Our mentoring team approach allows us to actively engage energetic newer faculty ("mentors in training") in primary mentoring roles, while supplementing and complementing them with seasoned, productive senior investigators. Funds are requested for six (6) predoctoral trainees. Students who have successfully completed the first year of doctoral study are eligible, although preference is given to students who have completed doctoral qualifying examinations, thereby selectively investing resources in committed, productive students who have already completed major program milestones. Of our 26 funded trainees since program start, 6 are now in faculty positions, 12 are in postdoctoral/research associate positions, 7 are still in training, and 1 has left academia. Seven (30%) of the trainees are members of under-represented groups.

Project Narrative

The purpose of this training program application is to prepare predoctoral researchers in strategies related to: (a) identifying potential antecedents of functional independence in older adults, and (b) designing and evaluating interventions that may prevent disability. Secondly, for those elders who have already experienced substantial loss of function, this predoctoral training program focuses on identifying policies and practices that may reduce negative consequences and iatrogenic effects of treatment. We propose to continue this successful program with six pre-doctoral slots a year, reserved for students beyond the first year of doctoral study.

Facilities and Resources

University of Florida

Overview of the University of Florida

The UF is a land-grant university with more than 4,100 distinguished faculty spanning 20 colleges and schools. It is the largest university in the Southeastern United States. More than 35 faculty are members of the National Academies of Science and/or Engineering, the Institute of Medicine, or the American Academy of Arts and Sciences. The University of Florida is a member of the Association of American Universities and is considered a Research Institution as designated by the Carnegie Commission on Higher Education. In 2009, the total sponsored research funding to the University was \$574 million. In 2008 Federal and foundation awards to the Health Science Center (HSC) increased to a high of \$291million. The HSC is the largest and most comprehensive academic health center in the Southeastern United States. The HSC encompasses six colleges (Medicine, Dentistry, Public Health and Health Professions, Nursing, Pharmacy, and Veterinary Medicine) and includes an institution wide Clinical Translational Sciences Institute (CTSI) funded by the NIH. Over 2,000 full-time clinical and basic science faculty members and almost 7,000 students, including over 800 graduate students, are located within the 3.2 million square foot HSC facility. All of the HSC colleges are adjacent to each other facilitating the multidisciplinary collaborations and interactions. The hospitals and clinics including Shands Hospital at the UF, the flagship teaching hospital and the neighboring Veterans Affairs Medical Center of Gainesville are also located on the HSC campus.

Libraries

UF Libraries: The University of Florida Library System, made up of 9 libraries, constitutes the largest information resource in the State of Florida. It contains more than 4,000,000 volumes, 1,000,000 government documents, 4,200,000 microforms, and 550,000 maps and images. In addition, the libraries provide over 425,000 links to online resources, including e-books, databases, government documents, and full texts of journals. The Digital Library Center is developing the UF Digital Collections and contributes to the Publication of Archival, Library & Museum Materials (PALMM) initiative of the State University System. All of the libraries serve the University's faculty and students; however, each has a special mission as primary support of specific colleges and degree programs. Six libraries in the system are known as the George A. Smathers Libraries of the University of Florida. The other two (Health Sciences and Legal Information) are attached to their respective administrative units.

The University of Florida Health Science Center Libraries serve as a primary information center for the staff, faculty and students within the HSC. The HSC Libraries are part of the National Network of Libraries of Medicine and have an extensive public computing area that provides access to MEDLINE, CINAHL, Web of Science (Science/Social Science Citation Indexes), Health Reference Center, AIDSLINE, TOXLINE, Dissertation Abstracts International, Journal Citation Reports, the Cochrane suite of Evidence-Based Medicine resources, and multiple additional databases available through Cambridge Scientific Abstracts, EbscoHost and WilsonOmniFiles. Remote library access is provided through a campuswide fiber optic backbone, proxy and dial-up services, and a downloadable Virtual Private Network software package. Classes on database searching, catalog instruction, and use of bibliographic software packages such as EndNote and RefWorks are taught each semester for UF faculty, staff, and students (Note: PHHP has a site license for EndNotes and supports this software to networked computers in its system). UF Library classes help to improve library and information searching skills. Some classes are taught through course-integrated instruction while others are offered for the whole UF community. Several private-study rooms can be reserved for group discussion or private work, as well as the primary student study area — available 24/7 — called the “blue room.” The HSC Libraries’ collection supports instruction and research for the six HSC colleges. The Collection Management department orders all formats of materials and evaluates the quality and use of the materials received. The HSC Libraries provide public access to electronic resources in the Informatics Lab, located on the second floor. There are approximately 89,660 books, 251,090 journal volumes, and 9,000 audiovisual resources. The HSC Libraries also provide liaison services to individual departments and programs. The liaisons scan the literature and alert faculty members to recently published resources in their disciplines. They also participate in student orientations and provide classes on specific topics within courses in the College. The HSC library staff includes a public health specialist, Nancy Schaeffer (<http://www.library.health.ufl.edu/services/liaisons.html>) who provides services and training for faculty and students.

Host College: College of Public Health and Health Professions

College of Public Health and Health Professions

The College of Public Health & Health Professions is one of the largest and most diversified health education institutions in the nation. Established in 1958, the College of Public Health and Health Professions was the first college in the United States dedicated to educating students of many different health professions. Today, Public Health and Health Professions is one of six colleges that comprise the University of Florida Health Science Center. The other colleges are Dentistry, Medicine, Nursing, Pharmacy, and Veterinary Medicine. The College of Public Health and Health Professions is a national leader in the education of health professionals. Currently, students are educated in the fields of Clinical and Health Psychology, Health Science, Health Services Administration, Health Services Research, Occupational Therapy, Physical Therapy, Public Health (Social and Behavioral Science), Public Health (Environmental and Global Health), Rehabilitation Counseling, Rehabilitation Science, and Speech, Language Pathology and Audiology. The College of Public Health & Health Professions places emphasis on the development of intellectual resources and skills enabling our graduates to prosper in today's complex health delivery systems. In addition, the College is committed to the development of cutting edge science in areas such as health and behavior, the rehabilitation of central nervous system impairment, and health systems functioning.

The College of Public Health & Health Professions (PHHP) is located in the new Health Professions, Nursing, & Pharmacy (HPNP) building, which was completed in 2003. The PHHP classroom space is comprised of 11 classrooms, 4 lecture halls, 1 auditorium, and 1 distance room, a total of 7,783 square feet. Teaching Labs provide Audio/Visual (A/V) services in the HPNP building, and on-site staffs are capable of diagnosing and repairing common A/V problems quickly. They have a cache of commonly used equipment readily available to address A/V needs not met by the equipment already in the classrooms. Standard equipment in each classroom includes a podium and computer access to the web and for PowerPoint presentations, and additional A/V equipment (projectors, TV/Video, etc.) can be requested. The Health Science Center has an Access Grid node in rooms C1-11 in the Communicore Building. This facility uses Internet2 technology to create a collaborative video interaction with multiple remote sites. There is no charge to use the node and conferences are scheduled through the Teaching Labs. The UF HSC is planning to expand its Access Grid capability by providing switching mechanisms to allow other video-equipped rooms to participate in Access Grid events. Several conference/meeting rooms are available in the Public Health and Health Professions Research Complex (see below) that are available for use by any PHHP faculty/laboratory. The rooms are scheduled using Outlook software. There are 2 large conference rooms with the capacity to hold 20-25 individual. These conference rooms come equipped with a projection screen, whiteboard, network port, and conference calling capability. Additional office space can be allocated with approval from the Dean of the College of PHHP.

As previously mentioned, the College of PHHP also includes the Public Health & Health Professions Research Complex, which is located in the Dental Wing (Ground Floor) of the Health Science Center, and totals 15,690 square feet of dedicated research space. Assignment of researcher space is managed by the Associate Dean for Research and is reviewed on an annual basis.

Participating Departments

Clinical and Health Psychology. The purpose of the Clinical and Health Psychology (CHP) program is to educate students in psychology via a scientist-practitioner model in order to be competent psychologists and improve the quality of life of people through research, education and the delivery of health services. Faculty and students are engaged in the production of scientific knowledge, educational and training outcomes, and leading-edge patient care. Data regarding scientific productivity, program completion (degrees conferred), grant awards, clinical service, national rankings, and honors and awards are useful measures of our productivity. Recently CHP received the prestigious American Psychological Association's (APA) Board of Educational Affairs Award to Advance Interdisciplinary Education and Training in Psychology. This program operates its own Psychology Clinic, which is the site for clinical training for students. The Psychology Clinic is strategically located within Shands Hospital, providing access to a unique and diverse range of patients. Students in the CHP program enter into one of four concentrations: Clinical Child/Pediatric, Clinical Health, Neuropsychology/ Cognitive Neuroscience or Emotion Neuroscience and Psychopathology. Within each special concentration, students have choose two options, a research focused track (clinical research) or a scientist practitioner track. Admissions of the program is determined by an admissions committee represented by the faculty. Out of approximately 400 applicants, admissions is granted to 12-15 students annually. Ph.D. candidacy is granted upon fulfillment of required course work, clinical practicum and an oral defense of each student's Master's thesis. Students then go on to complete an advanced practicum, undergo a qualifying examination of topics chosen by the students and their dissertation committee, and provide an oral defense of their dissertation. Finally, a 12-month full-time internship is completed at an APA accredited program.

Interdisciplinary Graduate Program (IDP) in Biomedical Sciences. The Interdisciplinary Program (IDP) in Biomedical Sciences at the University of Florida College of Medicine provides a rewarding and highly flexible educational and training experience, leading to a Ph.D. degree. The goals of the program are to expand the students knowledge base, provide experimental training, and focus the students natural creativity and talents in the discovery process. The IDP program consists of a common recruiting and admission process, and a one or two semester integrated educational and training period. After the first or second semester in the IDP, students choose one of six advanced concentrations for more specialized training. These advanced concentrations include: Biochemistry & Molecular Biology, Genetics, Immunology & Microbiology, Molecular Cell Biology, Neuroscience, Physiology & Pharmacology. The IDP curriculum is designed to provide maximum flexibility for the training of biomedical research scientists, and prepare them for careers in academics, government or industry. An important feature of the program is that students enter with no formal commitment to any advanced program or research laboratory, and they may choose from any mentor among the entire IDP faculty for first-year laboratory rotations and ultimately for their dissertation mentor. Admission to the IDP is determined by a faculty committee representing all advanced concentrations. Ph.D. candidacy is granted after successful completion of the minimum required course work and a qualifying exam. This exam consists of an oral defense of a dissertation research proposal written using the National Institutes of Health grant application format. The dissertation research project is overseen by a committee consisting of the supervisory faculty member and other graduate faculty. After finishing the dissertation research, the student presents their research in a seminar to the faculty at-large and then defends this research to their supervisory committee. The typical student will take 4-5 years to complete the necessary requirements leading to the Ph.D. degree.

Applied Physiology and Kinesiology (APK). The primary mission of the Ph.D. program in Applied Physiology and Kinesiology is to prepare individuals for careers in research and teaching. Therefore, a strong emphasis is placed on research and laboratory experiences and mastery of advanced technology. This department is housed in the College of Health and Human Performance, led by Dean Steve Dorman Ph.D., M.P.H. This program has been rated one of the top graduate programs in the country by the Chronicle of Higher Education. The Ph.D. program in Applied Physiology and Kinesiology is offered with concentrations in biobehavioral science and exercise physiology. Students in the biobehavioral science concentration specialize in one of four areas: biomechanics, exercise / performance psychology, motor control / learning, or sports medicine. These interdisciplinary concentrations focus on preparing students as researchers with a blend of course work and research training.. These interdisciplinary concentrations blend concentrated course work with research. Research projects cover the full spectrum of human potential: from young to old, fit to unfit, healthy to diseased, able-bodied to disabled, and from the casual recreational participant to the high-level athlete. In order to cover this wide spectrum HHP has established meaningful research relationships with units in the College of Medicine, the College of Public Health and Health Professions, the College of Engineering,

the Departments of Veterinary Medicine, Pharmacology, Physiology, Psychology, Zoology, the Veterans Administration Center, and the Center for Gerontological Studies. The HHP program is designed to have maximum flexibility in coursework and students are expected to complete core courses in the Department of Applied Physiology and Kinesiology as well as additional specialized courses in various departments on the University of Florida campus. Students complete a written qualifying exam followed by an oral defense in and a dissertation project.

Nursing. A Ph.D. in Nursing Sciences can provide an endless stream of career opportunities in health administration, clinical research, and advanced clinical practice, as well as in social, governmental, and health care organizations. Research areas include: aging and health, women's health, bio-behavioral interventions, and health policy. A total of 62 credit hours are required to complete the Ph.D. in Nursing Sciences. The coursework for first years is predominantly core classes and electives. During the second year, students will begin taking classes in their area of specialization, as well as taking the qualifying examination at the end of the year. The third year curriculum is exclusively research for the doctoral dissertation.

Psychology. This department is distinct from Clinical and Health Psychology (above, housed in the College of Public Health and Health Professions). The Department of Psychology, housed in the College of Liberal Arts and Sciences, has a graduate program offers students training in one of five specialty areas: Behavior Analysis, Behavioral and Cognitive Neuroscience, Counseling Psychology, Developmental Psychology, and Social Psychology. Students are encouraged to participate in integrated research relating to multiple program areas within the department, as well as interdisciplinary institutes, such as the McKnight Brain Institute. The sum credits for required courses, research, practica, and internship for a Ph.D. in Psychology must be a minimum of 90 credit hours. A required qualifying examination is held once a year for eligible students who have completed their Master's degree or research requirement. This course load is expected to take five years to complete, with a required APA-approved pre-doctoral internship during the fifth year.

Health Services Research Management Policy. The Ph.D. program in Health Services Research prepares students to apply research methods and scientific knowledge to the study of health services organizations and systems. Students are required to take basic health policy and foundation courses, as well as courses in methods and research. Advanced seminars are also a required portion of the curriculum, as well as electives taken that fit in the student's program of study. At the conclusion of the second year, students are required to take a preliminary examination examining the student's ability to demonstrate a thorough understanding of the field of health service research and knowledge of the methodical approaches where health services research is conducted and the ability to integrate the material. Part of the preliminary examinations includes the primary qualifying examination, where the student will submit a formal proposal outlining their anticipated dissertation research.

Rehabilitation Science. The Rehabilitation Science program offers two areas of specialization: Disability Science and Movement Science. The doctoral program requires 50 credits of specialty courses: 18 credit hours must come from one (or a combination) of the two specialization areas, or another approved emphasis outside the department; and an additional 32 credit hours are elective or minor courses. Students must complete 15 credit hours of course work in research methods and statistics courses, 32 hours of research application, and 11 credits hours of course work in rehabilitation science application. The total course load for a Ph.D. in Rehabilitation Science is expected to take approximately four years to complete.

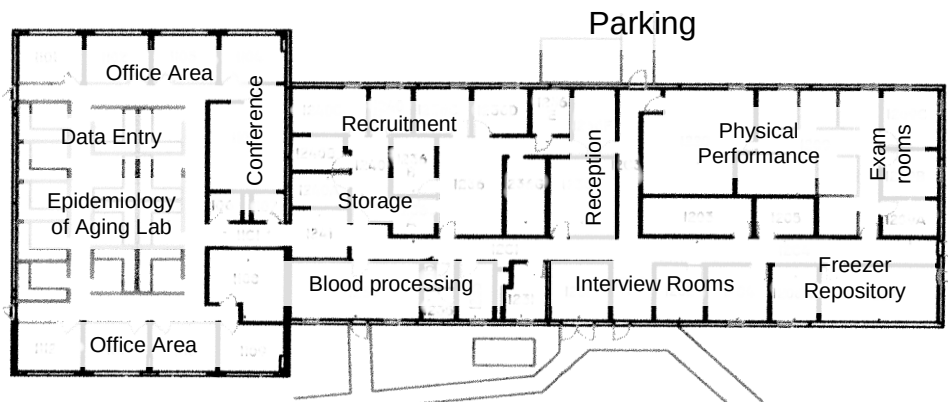
Office

The IOA, OAIC and Department of Aging and Geriatric Research which comprise a total of 6,500 sq. ft. of office space, partitioned in individual offices, cubicles, work rooms and meeting rooms. Each office is fitted with a state-of-the art personal computer and printer. The Department of Aging utilizes the latest Intel Pentium Core Duo 4 workstations running Microsoft Windows XP Professional/Vista/7 and Office 2007. Color photocopier and scanner, and fax is dedicated to the IOA-OAIC investigators and administrative support. The PI's 225 sq ft office is adjacent to the clinical research laboratory. It is equipped with desk, credenza, task chairs, two 4-drawer filing cabinets and hardwired T1 internet access. The research assistant has office space (144 sq ft) in the ARRC that is also adjacent to the clinical research laboratory and is readily accessible to the PI.

Aging and Rehabilitation Research Center (ARRC)

The ARRC will be used for the scheduling, tracking and assessments of study participants. The ARRC comprises a total of 9,500 sq. ft. of clinical research space. The facility has a dedicated parking lot immediately in front of the building and a direct entrance to facilitate access of research participants, a reception and waiting area, exam and interview rooms, meeting rooms, a biological specimens processing laboratory, data entry stations, study coordinators offices, a study drugs storage room, and several secured storage areas for study documents and areas for freezers for biological specimens repository. Scheduling participants will take place in the ARRC.

Floor plan of the Aging and Rehabilitation Research Center (ARRC) - "Butler Bldg" Approximately 9,500 sq. ft.



Equipment

Biodex-Cybox: The

Biodex dynamometer provides resistance throughout a joint's range of motion to assess isometric, isokinetic and isotonic muscle strength. The resistance is provided using an electric or hydraulic servo-controlled mechanism at a user-defined constant velocity for isokinetic measures. With the interfacing of Biodex isokinetic dynamometers, objective measures of human muscle function on variables related to torque, power, and endurance can be obtained. The system is designed with two output analog outputs to allow integration with the Biopac system for 1000 Hz temporal resolution.

Biopac System (MP 150 system): The MP System provides high resolution (16 bit), variable sample rates for analog and calculation channels, 16 analog inputs and two analog outputs, digital I/O lines (automatically control other TTL level equipment), and 16 online calculation channels. The MP150 System has high-speed acquisition (400 kHz aggregate), Ethernet connectivity, and the ability to view and control systems across a network. The system use the AcqKnowledge software included with each MP System. The software is based on a user-friendly graphical interface that allows the user to instantly view, measure, analyze, and transform data. Perform complex data acquisition, triggering and analyses using simple pull-down menus and dialogs. The BioPac MP150 data acquisition unit is interfaced with 6-channels four electromyographic amplifiers that collects recordings up to 100,000 Hz.

Physical activity assessment: There are several modes of objective physical activity that are readily available. We will use the latest Actigraph GT3X accelerometer model (The Actigraph Inc. Pensacola, FL). The devices are worn on the hip at the anterior axillary line for up to 30 days. The monitors are small (3.8 x 3.7 x 1.8 cm), lightweight (27 g) and include a uniaxial and triaxial accelerometers. The accelerometers measure accelerations in the range of 0.05-2 G with a band-limited frequency of 0.25-2.5 Hz. The monitors are initialized and data downloaded with the ActiLife software (Version 5.4.2).

Core equipment available for the proposed research. The OAIC provides core support of equipment

Konigsberg Instruments T42, 16 Channel Telemetry EMG System: The EMG Encoder is designed to transmit on a discrete carrier frequency set between 176 MHz and 216 MHz (the US TV channel 7 to 13 band which is also a FCC set-aside for unlicensed biomedical telemetry transmitters). Each encoder is PLL programmable so that it may be set to transmit in the low noise regions between alternating commercial transmitters. The software includes a scanning program that acts as a slow scanning spectrum analyzer; this enables the user to identify “quiet” parts of the spectrum in which to place the encoders.

Dual-energy X-ray Absorptiometry (DXA): A Lunar Prodigy Advance DXA (2004 model), manufactured by GE Medical Systems (Madison, WI), is available for utilization on research projects through the Center for Exercise Science, located in Florida Gym at the University of Florida. All DXA operations are performed by a technician holding a Basic X-ray Operator License from the State of Florida. The technician has also received DXA specific training from the manufacturer and follow-on training through the International Society for Clinical Densitometry, the latter leading to designation as a Certified Densitometry Technologist.

2008 Honda Odyssey Touring Elite Mini-van. The OAIC owns and operates a van to service participants with transportation needs. There is a dedicated driver who holds a chauffeur’s license and who will attend to transportation needs of our participants. Transportation will be available for all participants enrolled in the proposed study.

Overview of the Institute on Aging (IOA) and Older American Independence Center (OAIC) and resources available to the T32 program.

The IOA exists to improve the health, independence and quality of life of older adults by means of interdisciplinary teams in the areas of research, education and health care. Overarching goals of the IOA are: To develop an interdisciplinary and dynamic research that spans public health, social, health services, behavioral, clinical and basic sciences. The research focuses on mechanisms, etiology, and prevention of cognitive and physical disability. The IOA also focuses on maximizing the participation and life potential of older adults with disability and prevention of secondary disabilities.

The research program of the IOA focuses on the etiology and prevention of cognitive and physical disability. This focus is being pursued using an interdisciplinary approach that traverses the entire spectrum of social and biomedical investigation, including molecular biology, *in vitro* and animal studies, clinical research, behavioral and social sciences, epidemiology and health services research. The IOA initiated its major development phase in February 2005 with the creation of the new Department of Aging and Geriatric Research. The Department serves as support infrastructure for the IOA and academic home for faculty members from diverse disciplines who wish to pursue a career primarily focused on research and education on aging.

Clinical Translational Sciences Institute (CTSI)

Clinical Translational Sciences Institute (CTSI)

The overall mission of the CTSI (previously known as the General Clinical Research Center) is to improve human health by accelerating the translation of scientific discoveries into practical applications and practices for the diagnosis, treatment, prevention and cure of human diseases. It is geared to attract individual and team investigators to amplify their capabilities, and to help them effectively and quickly carry out their clinical and translational research. Clinical and Translational Science Institute improvements include awarding of funding for pilot projects, changing the IRB submission process, creating new informatics resources, and introducing a common reimbursement price list for clinical research charges. The CTSI's NIH award of nearly \$26 million has been matched by more than \$93 million in UF commitments. The CTSI currently offers more than 40 services to UF investigators. It partners with other CTSA's, Florida State University, the Orlando Regional Medical Center, the North Florida/ South Georgia Veterans Health System and the Moffitt Cancer Center. Entering our third year, the CTSI funds 140 faculty and staff, supports 11 programs, 12 clinical research units (including the UF Clinical Research Center), five core labs (including a large-scale biorepository) and six educational programs (including a Master of Science in clinical and translational science). Five essential laboratory services are provided by the CTSI. The Biobehavioral Core provides personnel trained in behavioral assessments to aide in administration, training and guidance for animal and human assessment work. The Biomedical Mass Spectrometry Core provides concentrated assistance in developing new assay for measurement of small molecules. Equipment available includes seven different autosamplers. Two units comprise the Genotyping Core, the Center for Pharmacogenomics Genotyping and the Molecular Services Core. Both units provide services such as receiving and processing of different samples for DNA/RNA isolation, amplification, and quantitation. Additional services provided by the CTSI include the Biorepository and Metabolomics Core.

Clinical Research Center. Within the CTSI is the Clinical Research Center. The purpose of the Clinical Research Center, which has been continuously funded since 1962 by the National Institutes of Health, is to make available to medical scientists the necessary resources to conduct clinical research. The CRC is located on the third floor of Shands Hospital, which is part of the campus of the UF Health Science complex and contiguous with the MBI. The Center averages approximately 130 approved protocols from over 100 faculty and trainees from six colleges who conduct translational research in diverse areas, including genetic diseases, gene therapy, pharmacokinetics and pharmacogenomics, diabetes, neurologic, neuromuscular, rheumatologic, cardiovascular and pulmonary diseases and rare disorders. It occupies over 94,000 square feet consisting of administrative offices, conference areas, a Data Services Laboratory for IT and statistical support, discrete outpatient suites, a seven-room inpatient ward, outpatient exam spaces, areas for sleep, exercise physiology and pain research and a core laboratory. The Core laboratory includes three separate facilities: (1) the Sample Processing Laboratory and (2) the DMA Bank, both on the third floor of Shands Hospital, and (3) the Biomedical Mass Spectrometry Laboratory (BMSL) on the second floor of the Medical Sciences Building. The BMSL houses state-of-the-art gas chromatography-mass spectrometry and liquid chromatography-mass spectrometry instruments. An extensive computer/statistics system, with user terminals, is housed in the Center's Data Services Laboratory for data storage, modeling and analysis. The GCRC Biostatistician and Informatics Manager staff the computing resources of the Data Services Laboratory (DSL) and assist researchers in designing protocols, collecting and managing data, analyzing data using appropriate statistical methods and interpreting and presenting those data and analyses in terms linked to the scientific goals of the study. Available equipment includes pulmonary function equipment, dental chair, Bod Pod, Body Box, Metabolic cart, EKG machine and blood pressure monitors. Additionally, a Research Patient Advocate is available to assist participants in research protocols and educate them in their rights and responsibilities.

Evelyn F. & William L. McKnight Brain Institute of the University of Florida

The McKnight Brain Institute (MBI) is one of the world's largest research institutions devoted to research of brain and nervous system disorders. The McKnight Brain Institute (MBI) is a university-wide initiative that was created to harness and enhance multi-disciplinary research, clinical care and educational skills in the prevention, diagnosis and treatment of diverse disorders of the nervous system; including stroke, Parkinson disease and other movement disorders, spinal cord injury, etc. Research and educational programs in the MBI incorporate over 300 faculty from 57 academic departments and 11 colleges. Departments of Neurology, Neuroscience, Neurosurgery and Psychiatry have their main offices in the MBI. The total MBI space is 201,850 sq ft, which include 55 laboratories and over 200 rooms, including offices. Many of the training faculty (Bizon, Bowers, Okun, Lewis, Li, Lui, Mandal, Perlstein, Setlow, Steindler) have an office and/or state-of-the-art laboratories in the MBI. In addition, a large number of seminars are held in one of the state-of-the-art MB Weese Auditorium. The MBI also houses the Advanced Magnetic Resonance Imaging and Spectroscopy (AMRIS) facility, which is a part of the National High Magnetic Field Laboratory. The Animal Behavior Core, the Cell & Tissue Analysis Core, and the Cell Sorting Core are also located within the MBI

Below is a description of some of the core facilities located in the Evelyn F. & William L. McKnight Brain Institute. Dr. Tetuso Ashizawa is the Executive Director of the Evelyn F. & William L. McKnight Brain Institute and serves on the MDNT Advisory Board (see letter of support)

Computer and Information Technology Services (CITS) Core. This core facility provides the hardware, software and personnel to catalyze the synergistic integration of all of the MBI-UF's high technology research and educational core facilities (especially the AMRIS and RSB Lab cores) and its multi-dimensional, multidisciplinary research Programmatic Matrix serving more than 300 faculty and other personnel. The CITS core equipment is found primarily, although not exclusively (i.e., we practice both the distributed and centralized models), on the ground floor of the MBI-UF building. Through a partnership with SGI the MBI-UF has installed a cluster of high performance graphics servers and workstations valued at several million dollars. This facility also includes a networked digital print shop equipped with high-resolution laser (including color) printer and flatbed scanners. All of the workstation computers can be used either on-site or remotely, through secure channels, as the entire MBI-UF building is wired with single and multimode fiber optic and category 5 copper cabling. The supercomputer hosts a variety of application software packages ranging from image viewing, processing and analysis programs, to 3D visualization and simulation packages. Examples include such popular packages as: MatLab and IDL for image processing and analysis; Splus for biostatistics and image analysis; AFNI for functional image processing and analysis; VoxelView and Medx for research and clinical image processing and 3D volume rendering; Sybyl and Biosym for modeling, simulation and visualization; and VNMR, NMRview, NMRPipe, Xplor, Paravision, XwinNMR, and many other MRI/S control and processing packages.

Advanced Magnetic Resonance Imaging and Spectroscopy (AMRIS) Core. This core is directed by Art Edision and there are six complementary imaging and chemical analysis research suites within the main AMRIS core facility (i.e., a wing attached to the main MBI-UF building). This multimillion-dollar facility is operated as a national resource in cooperation with the National Science Foundation-funded National High Magnetic Field Laboratory, the Departments of Defense and Veterans Affairs and the National Institute of Health. The instrumentation currently available includes:

- **a 3T whole body** MR system (Phillips Achieva) is dedicated to full-time research and supported by user fees. This scanner is designed for advanced MR studies and is optimized for neuroimaging. This system enhances our imaging performance in advanced brain studies based on susceptibility weighted contrast (diffusion weighted images and functional MRI), flow contrast (perfusion-weighted images) and chemical shift (spectroscopy). The design of the MR system provides easy access to human study subjects and readily accommodates headphones and eyeglass view devices that are required in stimulation-based functional MR imaging studies.
- **a 4.7 tesla (200 Mhz) 33 cm:** This system has two transmitter channels, a four-channel phased-array signal detection system and two sets of shielded gradients
- **11.04 tesla/40cm:** This is the strongest magnet anywhere at this bore size for NMR. The system has two sets of shielded gradients, two transmitter channels, and four receiver channels for phased array signal detection

- 11.74 tesla/5.2 cm: 5000 MHz narrow bore instrument of standard and service spectroscopic studies
- 14.1 tesla (600 Mhz) 5.2 cm: There are two 600 MHz narrow bore spectrometers, one is used for microscopy, and the other is used for molecular spectroscopy and is equipped with a low-temperature probe.
- • 17.6 T/8.9 cm: 750 MHz wide bore imager/spectrometer for protein spectroscopy and microscopy.

The AMRIS core also includes an eighth system; a 7 tesla (300 Mhz) 5.2 cm vertical bore system housed in a near-by building. Taken together, these eight magnet systems within the AMRIS core were designed for studies ranging from high resolution analyses on soluble and membrane associated biomolecules, to superfused single cells (e.g., Aplysia neurons) and tissue slices (e.g., hippocampus and heart), isolated organs (perfused or fixed) and whole body animal and human imaging and spectroscopy. The 11.74 tesla 40cm and the 17.6 tesla 8.9 cm systems are unique and are the most powerful MR imaging systems in the world for animals as large as primates and mice, respectively. All magnets are equipped with the latest software (all Bruker instruments) by the generous support of primarily the DoD and also the NHMFL and the McKnight Brain Institute. Virtually any high-resolution NMR experiment in one, two, or three dimensions can be designed and performed within the AMRIS facility. For human imaging studies, MBI-UF researchers also have access to two 1.5 tesla/64Mhz 100cm, and a 3 tesla/128Mhz 80cm bore MRI system (GE). The AMRIS facility also houses a fully equipped rf laboratory (vector impedance analyzers, noise figure meter, computer simulation facilities, etching capability), a chemistry laboratory, extensive support equipment (anesthesia and monitoring) and is operated by 7 FTE staff members.

Optical Microscopy (OM) Core. There are seven complementary imaging research suites within the OM core including: 1) laser scanning confocal microscopy; 2) optical sectioning deconvolution microscopy; 3) computer assisted motorized morphometric microscopy, image analysis (including 3-D reconstruction), and densitometry; 4) light/immuno-fluorescence microscopy; 5) Laser capture micro-dissection (i.e., single cell excision); 6) Optical coherence tomography (including endoscopic optical biopsy equipment); and 7) Near-field scanning optical microscopy and atomic force microscopy (under development in UF Department of Chemistry). All of these stations have digital image capture systems and their own computer, and several utilize our own customized image capture and/or analysis systems.

Cognitive/Clinical Neuroscience Laboratory. The Cognitive Neuroscience laboratory consists of approximately 1000 square feet, including two electrically and sound shielded testing room, and a control room where Colbourn equipment and computers are located for stimulus delivery and physiologic data acquisition. Currently six Ph.D. students are housed in the laboratory which is optimally placed adjacent to faculty offices, designed to foster student-faculty collaboration. Data analysis and delivery software includes E-Prime, BESA, Netstation, Brain Voyager, SPSS, AMOS and MPlus, while the computer science program provides computer software support. The laboratory utilizes multiple research methods including transcranial magnetic stimulation (TMS), computer methods for analyzing dynamic emotion displays, numerous psychophysiology measures including startle response, pupil dilation, skin conductance, facial EMG and HR. Additional, structural and functional neuroimaging, and cognitive science & neuropsychological measures are incorporated into research with patients with specific neurologic disease such as Parkinson's disease, temporal lobe epilepsy and mild cognitive impairment.

Center for Smell and Taste. The Center for Smell and Taste is made up of 55 faculty members along with postdoctoral associates and graduate students. Six different colleges are affiliated with the Center as well as the Institute of Food and Agricultural Sciences, the Whitney Laboratory for Marine Bioscience, the US Department of Agriculture at UF, and the US Veteran's Administration at UF. Facilities provide an environment to conduct human clinical research, bioengineering research, and animal behavioral research including genetic engineering and psychophysical testing.

Other MBI-UF research core facilities. In addition to research core facilities described above, the MBI-UF building also houses several other cores of great value to its investigators and students and their research goals. A few examples of these include 1) a *Human Brain Tissue Bank*, including a repository for Parkinson disease; 2) a *Specific Pathogen Free Animal Housing and Advanced Operating Room Facility*; 3) a *Transgenic Mouse Production Laboratory*, 4) *Behavioral- Analysis Rodent and Behavioral-Analysis Cat Facilities* 5) a *Differential Gene Expression Analysis Core* facility to assess changes in gene expression (with

SAGE, real-time RT-PCR, subtractive suppression hybridization and microarray) following stroke, traumatic injuries, aging and diseases of the brain and spinal cord and after restorative treatments; 6) a *Surgical Research and Training Lab* to train residents, fellows and practicing physicians in advanced neurosurgical (and other surgical specialties) procedures with state-of-the-art equipment (including MRI/CT/ultrasound/etc. image-guided surgery with SGI-workstation-controlled "Stealth Stations," high-end neurovascular surgical fluoroscopes, endoscopes, surgical microscopies, ultrasound equipment and more), and to conduct fundamental surgical research on human cadavers and anesthetized live animals; and 7) a *Multidisciplinary Simulation Computer Lab* in which scientists and physicians use the 11 SGI Work stations computers and the integrated Robotel Smartclass control system for fundamental research and to teach/learn such things as image-fusion for image-guided surgery. For additional information on these and other MBI-UF high technology core facilities and programs please access our web site at <http://www.mbi.ufl.edu>.

Applied Neuromechanics Laboratory.

Applied Neuromechanics Laboratory. This laboratory is directed by Chris Hass (mentor) and focuses on human movement studies, particularly gait and balance. It includes 6 rooms for personnel, equipment, data collection, and data analysis. There are two large, open areas (4m x 7m x 10m and 3x 6x6) used primarily to house data collection equipment for human movement studies including gait analysis. It contains a preparation area as well as a small work area available to faculty and students. The Applied Neuromechanics Lab computers are all networked for file sharing and printing. Data analysis and support software in the laboratory consists of packaged software (Labview v4.0, Matlab v4.2, Anapac v6.05, Microsoft (MS) Fortran v5.1, BorlandC/C++ v4.5, Quick Basic v4.0, Delta Graph v3.5, Cricket Graph v, MS Excel v5.0, MSWord v6.0, MOVE3D v4.0, SPSS 11.0, and Statistica v5.1) and software developed and implemented in our laboratory. Analysis routines that have been developed include, but are not limited to, statistical analyses, filtering, and calculating kinematic parameters, center of pressure, and joint muscular moments.

Measuring Kinetics: In the Applied Neuromechanics Lab, three forceplates (Bertec Corporation type 4060-08, 40cm x 60cm) are mounted adjacent to each other and level with the floor. They are isolated from each other as well as the surrounding floor structure. Each plate measures the applied horizontal and vertical forces that are used subsequently to calculate center of pressure (point of application of the applied force). The lab is also equipped with a new state of the art instrumented treadmill (Bertec corporation) which collects forces under each treadmill belt, and a Kin-Com (model 125AP) isokinetic dynamometer for the measurement of joint torques. Attachments are available for both upper extremity and lower extremity evaluation. In addition, we have a custom built bimanual manipulation object composed of transducers that measure force (F) in three dimensions; F_x =shear force; F_y =tangential or load and F_z =normal or grip and torque in each dimension

Additional Equipment: The Applied Neuromechanics Lab within the Center for Exercise Science utilizes a new Vicon motion capture system. Fifteen cameras with infrared lights are linked to a Data Hub and enables synchronized collection of analog data. The LifeScience suite of software including Body Builder, Nexus, WorkStation, Polygon, and Plug-in-Gait and their associated plug-ins are used to generate and evaluate kinematic and kinetic parameters of interest. In addition to the Vicon system we have an 7 camera Motion Analysis Corp Hawk system with a full package of analytical software and two video recording systems are available for use. These systems can be used in conjunction with our 6 camera motion measurement system. For measuring the spatiotemporal kinematics of gait, the lab has a 16 foot GaitRite system.

Other pieces of equipment in our laboratory include the Applied Neuromechanics Laboratory is also equipped with a 16 channel telemetered EMG system (Konigsburg Instruments) to measure the electrical activity of muscles. Additionally a Landice treadmill (Quinton, 2.2ft x 6.5ft), Woodway Split Belt Treadmill and a 828E Monark ergometer (Monark Exercise AB) are available for use are.

Center for Pain Research and Behavioral Health

Center for Pain Research and Behavioral Health

Dr. Michael Robinson directs the Center for Pain Research and Behavioral Health. The focus of this center lies in increasing the understanding of the experience of pain in humans. This facility consists of 880 square feet of space, housing laboratory equipment with 8 microcomputers on a local area network. Each computer is equipped with software including SPSS, SAS, Lotus Approach and Microsoft Access. The laboratory additionally includes psychophysical data acquisition devices, along with workstations for storage and manipulation of data. The center consists of nine faculty members and six doctoral graduate students and is conveniently located next to the Psychology Clinic at the University of Florida, facilitating access to a wide range of clinic populations.

Participant Recruitment

Dr. Marsiske serves as the Core Leader for the Recruitment, Adherence and Retention Core of the University of Florida NIA-funded Pepper Center (Claude Denson Pepper Older Americans' Independence Center). As such, he has direct control of available recruitment resources, which will be made available to trainees.

Resources for participant recruitment through the OAIC and CTSI

The Recruitment, Adherence and Retention (RAR) Core of the Claude D. Pepper Older Americans Independence Center at the University of Florida is tasked with ensuring (a) a steady flow of prospective participants to supported studies, (b) that participants are diverse and heterogeneous with respect to disability status and race/ethnicity, and (c) that affiliated investigators (especially junior scholars) have access to necessary information regarding feasibility, participant availability, and strategies for communicating with prospective participants. A key goal of the RAR Core is to support the generalizability and external validity of study findings. To ensure adequate representation of low functioning older persons in its studies investigators have developed substantial experience with the recruitment of older adults, especially minorities, both in the Gainesville/Alachua County region, and in the more general North Central Florida catchment area of the center. The RAR Core will directly provide services to support recruitment, including development and implementation of recruitment strategies, monitoring and reporting recruitment progress, and development of recruitment materials. The RAR Core also helps OAIC-affiliated studies and investigators, especially Junior Scholars, to develop strategies for monitoring and improving participants' adherence and retention in clinical research studies. The presence of a dedicated core also facilitates enrollment of women, ethnic minorities, and elders with disabilities, all of whom have often been under-represented in both observational and intervention studies. The RAR Core works in partnership, particularly, with Clinical Translational Resource Core to evaluate the real-time progress of each study, and to ensure seamless integration of recruitment, screening, and data acquisition/randomization. The RAR Core continuously evaluates the success of strategies to facilitate participation, retention and adherence in OAIC-associated research, and seeks to identify the most effective and efficient RAR strategies. In both the services provided and studies conducted by the Recruitment Core, a particular emphasis is on the participation of ethnic minorities and persons into research on aging.

Other recruitment resources

Pepper OAIC Registry: Over the past 4 years the RAR built the Pepper OAIC Registry. Specific demographics are outlined in the Enrollment Reports in section E.2.1.d. The registry was built in four major ways: (1) Offering registry membership to all participants who do not qualify for a study (in which they have expressed interest), or who have completed participation in a study; (2) a direct mail campaign (10,000 pieces) sent to Alachua County residents aged 65 and older in the Summer of 2008; (3) offering registry participation at community outreach events (e.g., the RAR Core community presentation series detailed in the proposal narrative; and (4) other miscellaneous contacts received by the OAIC/loA staff from seniors interested in research. Findings from these efforts demonstrate that the registry under-represents the very old and African American elders. For African American recruitment, in particular, we draw heavily on our community consultants as described below under "Minority Outreach Program (Church Communicators)".

Most of the RAR activities are housed in the "Screening and Recruitment suite" of the Institute on Aging Health Promotion Research Center. Within the larger 6,400 sq. ft. facility, the screening suite occupies four cubicles, a coordinator office, and a small meeting/whiteboard area. Each cubicle and the coordinator's office are equipped with an IP-telephone (with multi-line, caller-ID, mail forwarding and voice mail capability). Each phone is also equipped with a wired or wireless headset. The phones are connected in a "rollover phone bank", so that if a particular phone in the tree is busy, calls are immediately to the next available line. Only when all five phones are busy or unattended (e.g., after business hours) does voicemail capture the caller's information.

When a participant is reached, initial screening occurs using a CATI (Computer Assisted Telephone Interview) framework. Using a web-enabled interface (programmed in association with our Data Management core), the study recruited for is selected, data entry occurs in real-time, and instant accrual reports can be generated.

Real-time communication with the ARRC is facilitated by (a) shared web-enabled calendars, which are updated in real time; (b) direct-line telephone contact between all RAR staff members and study coordinators housed in the ARRC; (c) e-mail and fax; (d) daily in-person "mail runs" (at the start and end of the day) to ensure that paper correspondence (e.g., reply cards from prospective participants) is in the hands of screening staff; transportation of materials is rendered HIPAA compliant by being placed in locking hi-denier canvas bags (as used for transport of financial securities in the banking industry); (e) shuttling of materials and persons by the Institute on Aging driver on an as-needed basis.

The RAR collaborates with the CTSI in three major ways:

- (a) Through the bioinformatics core, the CTSI will represent a unique resource for recruitment by prescreening potential research study participants' characteristics by means of the newly established EPIC electronic medical records database and other patient databases. We have begun the process of IRB application for HIPAA-compliant patient contacts to convey research solicitations to discharged patients who meet enrollment criteria for our studies.
- (b) Collaboration with the CTSI Community Engagement Key Function Core, which serves to send research outreach messages to the community. Key resources in the CTSI are REDCap and ResearchMatch. REDCap (Research Electronic Data Capture) is a secure, web-based application designed exclusively to support data capture for research studies. REDCap provides: 1) an intuitive interface for data entry (with data validation); 2) audit trails for tracking data manipulation and export procedures; 3) automated export procedures for seamless data downloads to common statistical packages (SPSS, SAS, Stata, R); 4) procedures for importing data from external sources; and 5) advanced features, such as branching logic and calculated fields. ResearchMatch.org is a not-for-profit secure Web site, designed to provide people who are interested in participating in research the opportunity to be matched with studies that may be the right fit for them. ResearchMatch offers an easy-to-use, free and safe way for volunteers to connect with thousands of researchers who are conducting research on a wide range of diseases.
- (c) Through a Jacksonville-engagement initiative. Under the direction of Mobeen Rathore, MD (a Shands-Jacksonville physician and Jacksonville area co-director of the CTSI Community Engagement Core), we are being connected with the "Jacksonville Urban Disparities Initiative" (JUDI), a network of clinics serving (primarily) minority-underserved regions of the Jacksonville Metropolitan Area. Working with these clinics, our long-term goal is to be able to deliver customized recruitment messages to patients within the JUDI clinics who are willing to receive such information.

Shands Hospital at the University of Florida: The primary clinical facilities for the University of Florida are located in Gainesville, Jacksonville, Starke, and Lake City, Florida. There are nine hospitals at these sites with 2,200 licensed beds. Shands Hospital at the University of Florida in Gainesville is the primary on-site teaching hospital for the HSC. The Jacksonville campus has a 528-bed University Medical Center. UF and Shands also have an inpatient physical rehabilitation facility, an inpatient behavioral health facility, and 12 home health care agencies. Together, the facilities and physician network under the University of Florida Health System have created the Southeast's largest and most comprehensive academic medical center. The average occupancy for Shands Hospital at the HSC complex is 90%.

The North Florida/South Georgia Veterans Health System: The Veterans Health System consists of two medical centers (Gainesville and Lake City), three large multi-specialty outpatient clinics, and five small community-based primary care outpatient clinics. The Malcom Randall Veterans Administration Medical Center (VAMC) is a tertiary care facility and teaching hospital, which is physically and functionally connected to UF. The Gainesville VAMC combines a full range of patient care services with state-of-the-art technology that is enhanced and supported through education and research. North Florida/South Georgia Veterans Health System workload exceeds 106,000 unique patients and 990,000 outpatient visits. Over 180 University of Florida medical school residents, interns, and students are trained at the Gainesville and Lake City VA Medical Center each year. Programs are also in place with the University of Florida for dentistry, nursing, physical therapy, health services administration, and pharmacy.

The VAMC also has a Geriatric Research Education and Clinical Center (GRECC). The GRECC is a center of excellence designed for the advancement and integration of research, education, and clinical achievements in geriatrics and gerontology. Clinical investigators from medicine, dentistry, pharmacy, and health-related professions collaborate on multidisciplinary research projects in this center. In 2008 GRECC members received \$3.5 million in total extramural funding. Areas of research included, geropharmacology, dementia, coronary risk factors, exercise in the frail elderly, and rehabilitation care.

Brooks Rehabilitation Hospital and Health System Jacksonville, Florida is a 127-bed not for profit hospital dedicated to treating patients with brain injury, strokes, spinal cord injury, and comprehensive orthopedic problems. It also has a network of over 18 outpatient facilities and under construction now is a 60,000 sq foot

medical wellness facility that is designed to serve training and physical activity needs of those with disability and the frail elderly. The Brooks Health system in Jacksonville, Florida has an ongoing research partnership with the University of Florida through the Brooks Center for Rehabilitation Studies. The Jacksonville campus of the Brooks Health system is home to a 4000 sq foot human performance lab that is equipped with the latest equipment to evaluate mechanisms of walking recovery (force plates, VICON Motion Analysis, Treadmills). This clinical research facility is supported by endowments and directed gifts to UF. We are already collaborating with the Brooks team in recruitment for the LIFE trial, a major dual-sited study supported by the OAIC RAR.

IOA OAIC Lake Nona facility, Orlando Campus. Slated to open in August 2012, this is a satellite clinical research unit in Lake Nona near Orlando, Florida of approximately 4,200 GSF of space dedicated to the IOA and OAIC. Completion is expected in early 2012. This expansion will create global outreach for IOA and OAIC, and serve as a base for recruitment of research study participants in the greater Orlando catchment area with an emphasis on Hispanic and Latino communities. The space provided will include lobby and reception, conference room, 6 exam/interview rooms for physical and cognitive assessments (interview, physical exams, DEXA, biopsy, phlebotomy, body composition, muscle strength, electrophysiological measures, and general performance measures), 25 meter corridor to perform walking testing, biological specimen (blood, urine, muscle, fat) collection rooms, processing and temporary storage, and small laboratory area, nurse station, storage, drugs for pharmacological studies, participant records, participant lounge, staff lounge, and faculty and staff office/work areas.

Minority Outreach Program (Church Communicators): Recruitment core investigators have a long-standing history of associations with the local community particularly in the service provision section. A particular focus is with faith-based, civic and governmental groups who reach out to underserved populations; in Gainesville, this is largely the African American population.

One key venue for regular recruitment is the "Senior Citizens Health Forum," which has been conducted annually since 1994. The Senior Citizens Health Forum was developed by Dr. Chestnut, while a member of the Florida Legislature to address the health needs of seniors, primarily African Americans. Information on chronic disease, pharmaceutical assistance, Medicaid services, fall prevention, social security, nutrition, geriatric research and so on has been presented. Attendance is facilitated by high profile speakers, including members of the U.S. Congress, the Florida Secretary of Elder Affairs, and University of Florida based experts. Dr. Chestnut is active in a number of local agencies and organizations, through which recruitment is facilitated. Chestnut currently serves as President of the Visionaries, Inc. (an African American Woman's Club founded in 1940), Board member of the Alzheimer's Association, Governing Board of the Alachua County Library District, Executive Board Member of the North Central Florida March of Dimes, as member of the Education Committee for the State NAACP and a member of the National Association of Counties Health Steering Committee. She holds Membership in Altrusa, the League of Women Voters, Friends of the Library, the Gainesville Women's Forum, Alpha Kappa Alpha Sorority and the Gainesville Chapter of the Links. Moreover, she served as past President of the Florida Association of Student Service Administrators. Most recently, she was awarded the Easter Seals' 2005 Outstanding Advocate Award for an Elected Municipal Official, by the National Easter Seals' Organization.

Efforts by Dr. Chestnut have mobilized the faith-based community in Gainesville and Alachua County and paved a pathway for enhanced recruitment of ethnic minorities. She maintains an active cohort of Church Communicators, a group of older adult volunteers who share information about local community programs and issues with primarily African American church communities in the region. She also maintains regular dialog with the Black Ministers' Association, a local coalition of clergy in Gainesville. Partner churches in Gainesville include the Mt. Carmel Baptist Church, Mt. Pleasant United Methodist Church, First Missionary Baptist Church, Shady Grove Primitive Baptist Church, Friendship Baptist Church, Mt. Herman Baptist Church, 15th Street of Church of God by Faith, and Williams Temple Church of God in Christ.

Because of historical concerns about recruitment among some adults in the African American community, particularly in older cohort, a key goal has been to gain confidence and assure potential participants of the safeguards in place today to protect their interest. Because RAR Core investigators have a long-term relationship in providing health education/prevention to the community since 1998, there is both credibility and confidence. Community presentations (the annual Seniors Forum, community lectures at the Pine Grove Senior Apartments, meetings with the Alachua County Health Department) are a common approach to reach out to the community. The established relationship permits us to also deliver recruitment messages with a similar level of trust, and an understanding that our preferred relationship is a quid pro quo

(i.e., we will provide education and outreach; this is the context in which we are also asking for community members' help by participating in health-related research).

The programs have established relationships with The Gainesville Guardian (a New York Times-owned African American newspaper), and the local Senior Times (an advertiser-supported Senior paper). Articles on the Registry and OAIC already ran in late August/early September 2005. In addition, we have standing invitations to continue informing readership about the OAIC and associated studies and registries.

Working with our Church Communicators, and the Senior Citizens Health Fair, we will conduct regular community-based screenings for diabetes, hypertension, and osteoporosis. At each of these community events, recruitment materials for specific studies will be available, as will general registry information. We have extensive experience with screening at places where older adults congregate, such as apartment buildings, senior citizen clubs and churches, and the Gainesville Oaks Mall.

Computing Environment

Computing Environment: The UF&Shands Information Technology (IT) Department serves the information and technology needs for the patient care, academic *and research* missions of the UF & Shands Academic Health Center, which includes Shands HealthCare and the UF Health Science Center. The centralization of IT functions at the UF & Shands Academic Health Center, and its support of the tri-part missions fosters the secure flow of information from the clinical enterprises to the research environment. Two UF&Shands IT organizations play significant roles in data management as described below.

College of Public Health and Health Professions.

All PHHP computer systems are connected through the Academic Health Center data network. High-speed access to the Internet is via the University of Florida's campus network and its redundant connections to the Internet, Internet2 and Florida LambdaRail.

The networking infrastructure in the HPNP building is gigabit Ethernet. The HPNP Building data network provides 1000 megabit (mbit) service to all devices that can use it. The network will autonegotiate to the fastest rate possible for Devices not capable of Gigabit. The HPNP network also provides power over the network cable for devices capable of using it. The HPNP Building is equipped with secure 802.11g wireless networking using the 802.11x authentication standards and WPA2-Enterprise encryption. This service covers all interior spaces. The HPNP building's wireless network is part of the AHC-wide wireless network and devices configured to work in the AHC will also work at HPNP. The phones in the HPNP building are VOIP phones which use the same data network as your PC. Typically VOIP phones uses the same data port used by your PC, but the phone then provides another data port on its base for your PC to plug into.

The College of Public Health & Health Professions provides a full-service computing environment for its users offering standard services such as email, file, web, print, database as well as addressing more specialized server needs.

PHHP IT servers are based on multi-processor 64-bit architecture servers running virtualization software to support varied platform needs, allowing for easy growth, and providing for fast disaster recovery. These servers are connected to a multi-terabyte storage array enabling high I/O and data redundancy. All systems are housed in a modern data center at the Health Science Center with physical security, conditioned continuous power, redundant cooling systems, and high speed network connectivity. The data center servers require authenticated access for file, database, and processing services. These servers are protected from unauthorized access by physical means, network filters, patch management, and regular security audits. The data stored at the center is securely backed up nightly to tape backup systems and automatically transferred off-site to systems co-located at the NWRDC secure data center in Tallahassee, Florida.

All PHHP users are provided with space on PHHP file servers. These servers run modern Microsoft server operating systems and connect via fiber optics to an AHC-managed SAN array providing terabytes of fault tolerant storage to the college. User accounts are also associated with their departments giving them access to the department's folder on the share drive. By default all users are also given access to the PHHP Folder on the share drive, providing a shared space for the entire college.

Network Printing Services are provided for all networkable printers. Remote access to PHHP IT resources are available via VPN or Microsoft Remote Desktop. Everyone has the ability to create and publish his or her own personal webpages. Upon request webspace can be created for courses. Currently PHHP is using MySQL as a web database and takes on special projects from time to time to assist in the collection of data for research or surveys. The campus network also makes available such services as the campus mainframe running IBM z/OS and UF's High-Performance Computing Center.

The College of Public Health and Health Professions supplies each faculty and staff member with a modern business-class computer, depending on latest available technology. The standard machines are loaded with a range of work essential applications with a base install of MS Windows XP/7, MS Office 2007, Adobe Acrobat Reader, and McAfee Virus Scan. PHHP provides statistical analysis programs such as SAS, SPSS, JMP, Matlab, R, and STATA by request.

The PHHP IT staff consists of 4 full-time IT professionals and 3 part-time staff, including specialists in server management, networking, data supervision, storage schema, desktop support, and Web design. All users using a PHHP recommended PC would have the full support of the Colleges IT staff. The IT staff will assist with Setup, OS Installation, network printing and connectivity and new hardware installation. Despite limited application support, the IT staff can answer most questions. All College owned laptops would receive full support for software and hardware upgrades. In some cases the College has provided home PC's to some Faculty and Staff. IT will support all College owned home computers, provided they are brought in for service. The IT Center provides computer training free of charge to all UF faculty and staff.

PHHP IT Data Resources.

The University of Florida's College of Public Health and Health Professions provides a computing environment for its data coordination center. The data coordination center is based on multi-processor 64-bit architecture servers running virtualization software to support the varied platform needs of the center, allowing for easy growth, and providing for fast disaster recovery. These servers are connected to a multi-terabyte storage array enabling high I/O and data redundancy. All systems are housed in a modern data center at the Health Science Center with physical security, conditioned continuous power, redundant cooling systems, and high speed network connectivity. The data stored at the center is securely backed up nightly to tape backup systems and automatically transferred off-site to systems co-located at the NWRDC secure data center in Tallahassee, FL.

All data center systems are connected through the Health Science Center data network. High-speed access to the Internet is via the University of Florida's campus network and its redundant connections to the Internet, Internet2 and Florida LambdaRail. The campus network also makes available such services as the campus mainframe running IBM z/OS and UF's High-Performance Computing Center. The data center servers require authenticated access for file, database, and processing services. These servers are protected from unauthorized access by physical means, network filters, patch management, and regular security audits.

The personal computing environment for center staff standardizes on Dell Optiplex workstations running Microsoft Windows XP or 7, MacOS X, or Linux with statistical software packages such as SAS, SPSS, Stata, R, JMP, or Matlab . All staff workstations have high speed connections to the Health Science Center data network, and are protected via patch management software, managed anti-viral software and regular security audits.

The UF Clinical and Translational Research Informatics Program (CTRIP) is a dedicated core data management resource, providing research support in the areas of project collaboration, data collection, software engineering, database design, and data management. CTRIP engineers are highly experienced building, deploying and maintaining data management solutions and providing other data services. Data management applications support collection of diverse data, multi-center collaboration, data acquisition, analysis, integration, modeling, integrity, storage, and varying retrieval mechanisms and reporting. The CTRIP software engineering and development environment consists of the latest industry standard Intel workstations running Microsoft Windows software. Complex statistical analysis and modeling is done on the latest industry server hardware from Dell, HP, and IBM. CTRIP owns a considerable software library for statistical analysis, graphic design, and software engineering including the latest versions of programs like SAS, SPSS, R, Matlab, MySQL and Microsoft SQL Server 2005/2008. CTRIP delivers its data management and software engineering services in a well established professionally managed infrastructure managed by the UF&Shands IT Technical Services Division (TSD).

UF&Shands IT Technical Services Division (TSD) runs technologies in which research data and applications are stored and operated. Research data and applications enjoy the same level of confidentiality, integrity and availability investments and standards afforded to UF & Shands clinical systems because they all operate in the same technology infrastructure. Research servers run enterprise class operating systems and software including Debian Linux, Apache, PHP 5, MySQL 5, Microsoft Windows 2008 Server Enterprise Edition 64-bit, Microsoft SQL Server 2008, Microsoft Windows Terminal Server, and Linux RedHat Enterprise. The servers hosting CTRIP information systems are powerful, reliable, and secure, suitable for researching, storing, analyzing and modeling large sets of data. Currently TSD is trusted to warehouse millions of HIPAA protected records from varied sources across the nation, for research purposes, in up to ~80 Terra-Bytes of on-line

storage. Servers used for CTRIP information systems utilize the latest high speed fiber optic switched storage area networks (SAN) allowing 4 Gigabit per second (Gbps) data transfer speeds. This allows for high-speed access and manipulation of files in the multi-gigabyte range. These high-speed arrays have the ability to quickly expand while maintaining RAID 5 high availability and uptime. This allows the data to be secured, monitored, and always available while being protected from unauthorized access. The data center operated by the TSD is audited by internal and external audit teams on an annual basis. These audits review the data center's operations, and ensure compliance with TSD policies, procedures and standards. The data center is a climate controlled and secure facility with electronically controlled and auditable access. Power is conditioned and provided with dedicated battery and generator backup for high availability.

Network infrastructure at the UF & Shands Academic Health Center utilizes Cisco routers and switches to run dedicated 1,000 megabit fiber connections between site locations and is part of the University of Florida's site-wide managed network infrastructure. TSD employs the latest security technology including the latest Network Associates enterprise class virus scanning software. TSD utilizes the University wide Intrusion Detection System services for detecting and resolving network security anomalies. In addition, the University wide active directory is integral to information systems operated by TSD, offering an authoritative source of identity information and federated authentication. A Network Firewall suitable to protect clinical operations protects research operations as well. The entire UF&Shands IT organization, including CTRIP and TSD follow common documented and regularly reviewed HIPAA compliant information security policies, procedures and standards. Backup and recovery is accomplished using IBM's Tivoli Storage Manager with the latest TSM backup to disk features, including additional copies to an IBM 3584 Tape Library with encryption enabled 3592-E05 Tape Drives. TSD maintains concurrent and encrypted off-site backups as part of its documented disaster recovery plan.

Institute on Aging and Department of Aging and Geriatric Research Computing Environment: The Department of Aging relies on the UF&Shands IT network, technology and data management services as described under section b. above, for transmitting, accessing, storing, and analyzing data, and conducting data intensive research. The Department of Aging works closely with the UF&Shands IT organization to maintain a secure, high quality environment that is HIPAA compliant. Users enjoy network speeds of at least 10Mbit and in some cases up to 2 gigabit per second between workstations and servers in the data center. The Department of Aging utilizes the latest Intel workstations running Microsoft Windows 7 and Office 2010. The Department of Aging receives UF exchange email services and UF active directory services from the UF Office of Information Technology.

Research Informatics and Information Technology Strategy for recruitment: The relevant value of information and technology provided by the UF & Shands Academic Health Center to research is demonstrated starting with strategic decisions. There was a recent investment of over \$10 million by the UF & Shands Academic Health Center to implement the EPIC electronic medical record in its inpatient and outpatient operations. Twelve of 40 clinics are live on EPIC and inpatient went live in April of 2011. EPIC research features the ability for the UF human-based research community to set up studies in the EPIC database, and alert physicians during their visit with a patient, of a study for which their patient may be eligible.

Institutional Commitment

Institutional Commitment:

This is documented thoroughly in the body of the proposal and the letters of support.

Research training and the development of the next generation of scholars and scientists is a high priority for the University of Florida. In addition to the resources that are described in the Resources Section, the University of Florida is committing **new** financial support to the T32 program. As indicated in the letters of support, the University of Florida will **cover the 40% in tuition and fees not covered by the Training Grant**. Additionally, the Dean of the College of Public Health and Health Professions has committed over \$130,000 in new funds to help underwrite some of the infrastructure and training costs associated with this Training Grant. to match the support requested in this proposal. These funds will also be used to help with the recruitment of first-rate trainees, with a particular focus on under-represented and disadvantaged groups. This funding represents a significant investment by the University of Florida in this training program.

Not applicable

RESEARCH & RELATED Senior/Key Person Profile (Expanded)

PROFILE - Project Director/Principal Investigator				
Prefix	* First Name Michael	Middle Name	* Last Name Marsiske	Suffix
Position/Title: Associate Profe		Department: HP-CLINICAL / HLTH PSYCHOLOGY		
Organization Name: University of Florida Board of Trustees		Division: COLLEGE-PUBL HLTH / HLTH PROFS		
* Street1: Department of Clinical and Health Psychology HPNP Room		Street2: PO BOX 100165		
* City: GAINESVILLE	County: Alachua	* State: FL: Florida	Province:	
* Country: USA: UNITED STATES	* Zip / Postal Code: 32610-0165			
*Phone Number 3522735097		Fax Number 8017205897	* E-Mail marsiske@phhp.ufl.edu	
Credential, e.g., agency login: mmarsiske				
* Project Role: PD/PI		Other Project Role Category:		
Degree Type: PhD				
Degree Year: 1992				
		File Name	Mime Type	
*Attach Biographical Sketch		Marsiske_biosketch1003165898.pdf	application/pdf	
Attach Current & Pending Support		OtherSupport1003165900.pdf	application/pdf	

RESEARCH & RELATED Senior/Key Person Profile (Expanded)

Additional Senior/Key Person Form Attachments

When submitting senior/key persons in excess of 8 individuals, please attach additional senior/key person forms here. Each additional form attached here, will provide you with the ability to identify another 8 individuals, up to a maximum of 4 attachments (32 people).

The means to obtain a supplementary form is provided here on this form, by the button below. In order to extract, fill, and attach each additional form, simply follow these steps:

- Select the "Select to Extract the R&R Additional Senior/Key Person Form" button, which appears below.
- Save the file using a descriptive name, that will help you remember the content of the supplemental form that you are creating. When assigning a name to the file, please remember to give it the extension ".xfd" (for example, "My_Senior_Key.xfd"). If you do not name your file with the ".xfd" extension you will be unable to open it later, using your PureEdge viewer software.
- Using the "Open Form" tool on your PureEdge viewer, open the new form that you have just saved.
- Enter your additional Senior/Key Person information in this supplemental form. It is essentially the same as the Senior/Key person form that you see in the main body of your application.
- When you have completed entering information in the supplemental form, save it and close it.
- Return to this "Additional Senior/Key Person Form Attachments" page.
- Attach the saved supplemental form, that you just filled in, to one of the blocks provided on this "attachments" form.

Important: Please attach additional Senior/Key Person forms, using the blocks below. Please remember that the files you attach must be Senior/Key Person Pure Edge forms, which were previously extracted using the process outlined above. Attaching any other type of file may result in the inability to submit your application to Grants.gov.

- 1) Please attach Attachment 1
- 2) Please attach Attachment 2
- 3) Please attach Attachment 3
- 4) Please attach Attachment 4

	Filename
ADDITIONAL SENIOR/KEY PERSON PROFILE(S)	MimeType

	Filename
Additional Biographical Sketch(es) (Senior/Key Person)	MimeType

	Filename
Additional Current and Pending Support(s)	MimeType

BIOGRAPHICAL SKETCH

NAME Michael Marsiske	POSITION TITLE Associate Professor, Dept. of Clinical and Health Psychology, University of Florida		
eRA COMMONS USER NAME (credential, e.g., agency login) MMARSISKE			
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
University of Toronto	B.Sc.	1987	Psychology
Pennsylvania State University	M.S.	1990	Human Development & Fam Studies
Pennsylvania State University	Ph.D.	1992	Human Development & Fam Studies
Max Planck Institute for Human Development	Post-doc.	1992-19945	Psychology & Human Development

A. Personal statement.

Dr. Marsiske enthusiastically participates as Training Director and Mentor in this training grant, since pre- and post-doctoral training have been cornerstones of his academic career. Since 2003, he has been the Training Director of this NIA-funded predoctoral institutional T32 in aging. **He has also supervised or co-supervised** three predoctoral NRSA awards, two diversity supplements, and dissertation awards (R03, R36) aimed at enhancing professional diversity in aging. He has also supervised two predoctoral fellows funded by AARP. One of his diversity supplements was awarded to support Dr. Patricia Belchior as a post-doctoral fellow; she is now at McGill University. He is therefore ideally poised to provide guidance in training plan, coursework, and will be part of the regular faculty focus on the protection of human subjects.

Substantively, Dr. Marsiske is focused on cognitive aging. While his age focus has been with older adults, his general interests (identification of training strategies to improve memory, speed of processing, and executive functioning) fit well into a training grant that is focused on behavioral and neural plasticity, and interventions to improve decision making and everyday functioning. Indeed, Marsiske's more recent research looks at simple "everyday" interventions (video games, exergames, exercise) to produce sustainable and durable cognitive improvements in targeted participants. The ecologically valid outcomes of cognitive training (i.e., how training affects everyday functioning) is also a key theme in his work. Another through-line in all of Marsiske's work is a focus on racial/ethnic disparities in cognitive aging, and how interventions may reduce disparity. *This is germane to the current proposal because it fits with the "cognitive antecedents of disability" and "interventions to promote independence" foci of the current T32 proposal.* **Two proposals as PI (one R01, one R21) will be submitted to NIA to continue this line of research in June 2013.**

Dr. Marsiske is an Associate Professor and Associate chair of Clinical and Health Psychology at the University of Florida. In addition to funded research, Marsiske has taught, for 16 years, graduate statistics and methodology courses, including specialized courses in structural equation modeling, mixed effects models, and latent change models, as well as more traditional regression/ANOVA/logistic analyses. **He will advise the trainees in these methods, as relevant, above and beyond the biostatistical support indicated in this proposal**

B. Positions and Honors.

Positions

1992-1995	Postdoctoral Research Fellow, Center for Psychology and Human Development, Max Planck Institute for Human Development and Education
1995-	Assistant Professor, Institute of Gerontology and Department of Psychology, Wayne State University (Adjunct status since 2000)
2000-2003	Associate Director for Research, Institute on Aging; Associate Professor of Health Policy and Epidemiology, and Clinical and Health Psychology; Joint Professor of Psychology, Univ. Fla.
2003	Interim Director, Institute on Aging; Associate Professor of Clinical and Health Psychology; Joint Professor of Psychology, University of Florida (UF).
2003-	Associate Professor of Clinical and Health Psychology; Joint Professor of Psychology, UF
2007-	Affiliate Faculty, Department of Epidemiology and Biostatistics, UF

Honors

1994	Recipient of Fellowship for Summer Institute on Successful Midlife Development from the MacArthur Foundation Research Network on Successful Midlife Development
1995-	Member, Executive Committee, Division on Adult Development and Aging, American Psychol. Association
1997	Recipient, 1997 Springer Award for Early Career Achievement in Research on Adult Development and Aging, Division 20 (Adult Development and Aging), American Psychological Association
2003	Member, Editorial Board, <u>Journal of Gerontology: Psychological Sciences</u>
2004	Member, Editorial Board, <u>Aging, Neuropsychology and Cognition</u>
2003, 2005, 2006, 2009, 2011	Recipient, Audrey Schumacher Award for Teaching Excellence (for Statistics, Research Design and Measurement and Multivariate Statistics), Department of Clinical and Health Psychology, University of Florida
2008, 2009	Recipient, Research Mentorship Award (for Statistics, Research Design and Measurement and Multivariate Statistics), Department of Clinical and Health Psychology, University of Florida
2012-2015	University of Florida Research Foundation Professorship
2013	University of Florida Doctoral Mentoring Award

C. Peer-reviewed publications or manuscripts in press. (selected from 73 publications; selected here to show broad publication with trainees; PIF=5-year publication impact factor)

1. Cook, S. E., Marsiske, M., Thomas, K. R., Unverzagt, F. W., Wadley, V. G., Langbaum, J. B. S., & Crowe, Michael. (in press). Identification of Mild Cognitive Impairment in ACTIVE: Algorithmic Classification and Stability. *Journal of the International Neuropsychological Society*. PMID: 23095218, PMCID: Pending, NIHMSID: 439039, DOI pending, (PIF = 3.445).
2. McCrae, C. S., Vathauer, K. E., Dzierzewski, J. M., & **Marsiske, M.** (2011). Habitual sleep, reasoning, and processing speed in older adults with sleep complaints. *Cognitive Therapy and Research, published online*, PMID: Pending, PMCID: Pending, NIHMSID: 361254, <http://dx.doi.org/10.1007/s10608-011-9425-4>, (PIF=2.211).
3. Buman, M. P., Giacobbi, P. R., Dzierzewski, J. M., Aiken Morgan, A., McCrae, C. S., Roberts, B. L., & **Marsiske, M.** (2011). Peer volunteers improve long-term maintenance of physical activity with older adults: A randomized controlled trial. *Journal of Physical Activity and Health. 8 Suppl 2*, S257-S266. PMID: 21918240, PMCID: PMC3181088, NIHMSID: 313455, Retrieved from: <http://bit.ly/ycolMT> (PIF = 1.783** approx).
4. Zahodne, L. B., **Marsiske, M.**, Okun, M. S., Rodriguez, R. L., Malaty, I., & Bowers, D. (2012). Mood and motor trajectories in Parkinson's disease: Multivariate latent growth curve modeling. *Neuropsychology, 26*, 71–80. PMID: 22142359, PMCID: PMC3296901, NIHMSID: 313244, <http://dx.doi.org/10.1037/a0025119> (PIF=3.927)
5. Tucker, C. M., **Marsiske, M.**, Rice, K. G., Jones J. D., & Herman, K. C. (2011). Patient-Centered Culturally Sensitive Health Care: Model Testing and Refinement. *Health Psychology, 30*, 342-350. PMID:21553978, PMCID: PMC3092156, NIHMSID: 276878, DOI <http://dx.doi.org/10.1037/a0022967>, (PIF = 4.416).
6. McGee Campbell, J. L., Rowe, M. A., & **Marsiske, M.** (2010). Behavioral symptoms of dementia: A dyadic effect of caregivers' stress process. *Research in Gerontological Nursing*, PMID: 20873693, PMCID: PMC3140561, NIHMSID: 220979, <http://dx.doi.org/10.3928/19404921-20100901-02>, (PIF = 0.768** approx).
7. Kirsch-Darrow, L., Zahodne, L. B., **Marsiske, M.**, Okun, M. S., Foote, K. D., & Bowers, D. (2010). The trajectory of apathy after deep brain stimulation: From pre-surgery to 6 months post-surgery in Parkinson's disease. *Parkinsonism & Related Disorders, 17*, 182-188, PMID: 21256069, PMCID: PMC3045850, NIHMSID: 267993, <http://dx.doi.org/10.1016/j.parkreldis.2010.12.011> (PIF = 2.676)

8. Dzierzewski J..M., Williams J..M., Roditi D., **Marsiske M.**, McCoy K..J..M., McNamara J., Dautovich N., Robinson M..E., McCrae C.S.(2010) Daily Variations in Objective Nighttime Sleep and Subjective Morning Pain in Older Adults with Insomnia: Evidence of Covariation over Time. *Journal of the American Geriatric Society*, 58, 925-930. PMID: 20406316, PMCID: PMC2924958, NIHMSID: 218736, <http://dx.doi.org/10.1111/j.1532-5415.2010.02803.x> (PIF = 4.460)
9. **Marsiske, M.** (2009). Intervening with Late-Life Cognition: Lessons from the ACTIVE Study. Monograph published by the American Society on Aging, San Francisco: CA
10. Aiken Morgan, A. T., **Marsiske, M.**, & Whitfield, K. E. (2008). Characterizing and explaining differences in cognitive test performance between African American and European American older adults. *Experimental Aging Research*, 34, 80-100, PMID: 18189169, PMCID: PMC2211729, NIHMSID: 24817 <http://dx.doi.org/10.1080/03610730701776427> (PIF=1.298)
11. McCrae, C. S., McNamara, J. P. H., Rowe, M. A., Dzierzewski, J. M., Dirk, J., **Marsiske, M.**, & Craggs, J. G. (2008). Sleep and affect in older adults: Using multilevel modeling to examine daily associations. *Journal of Sleep Research*, 17, 42-53, PMID: 18275554, PMCID: PMC2923492, NIHMSID: 219179, <http://dx.doi.org/10.1111/j.1365-2869.2008.00621.x> (PIF=3.653)
12. Cook, S. E., & **Marsiske, M.** (2006). Subjective memory beliefs and cognitive performance in normal and mildly impaired older adults. *Aging and Mental Health*, 10, 413-423, PMID: 16798634, PMCID: PMC2905785, NIHMSID: 24852, <http://dx.doi.org/10.1080/13607860600638487> (PIF=1.720)
13. Allaire, J. C., & **Marsiske, M.** (2005). Intraindividual variability may not always indicate vulnerability in elders' cognitive performance. *Psychology and Aging*, 20, 390-401, PMID: 16248699, PMCID: PMC2908894, NIHMSID: 24853 <http://dx.doi.org/10.1037/0882-7974.20.3.390> (PIF=4.151)
14. Diehl, M., **Marsiske, M.**, Horgas, A. L., Saczynski, J., Rosenberg, A., & Willis, S. L. (2005). The Revised Observed Tasks of Daily Living: A performance-based assessment of everyday problem solving in older adults. *Journal of Applied Gerontology*, 24, 211-230, PMID: 18160968, PMCID: PMC2153442, NIHMSID: 24818 <http://dx.doi.org/10.1177/0733464804273772> (PIF=0.993)
15. Lindenberger, U., **Marsiske, M.**, & Baltes, P. B. (2000). Memorizing while walking: Increase in dual-task costs from young adulthood to old age. *Psychology and Aging*, 15, 417-436, PMID: 11014706, <http://dx.doi.org/10.1037/0882-7974.15.3.417> (PIF=4.151)

D. Research Support **Ongoing Research Support**

P30 AG028740 (Pahor; Marsiske Core Leader)	06/01/2007-03/31/2017	1.2 Calendar
National Institute on Aging	\$8,011,000	months
<i>Claude Denson Pepper Older Americans Independence Center</i>		
The major goals of this project are to provide infrastructure (administration, recruitment, clinical/pilot/developmental research support, biostatistics/data management) for research on the overarching themes of Sarcopenia and Disability		
D0339-I (Levy)	05/01/2013-04/30/2016	1.2 Calendar
Veterans Administration Rehabilitation Research and Development Service	\$824,839	months
<i>Virtual Environments for Therapeutic Solutions (VETS) mTBI/PTSD Phase II</i>		
In the service of ecologically valid cognitive/emotional assessment for veterans, two virtual environments (including a supermarket) will be developed. These environments will serve as the platform for tasks including visual search, price comparisons, change making, etc. The platform will support future research on therapeutic efficacy, and may be generalizable to other populations		
U01 AG022376 (Pahor)	09/01/2009-08/31/2014	0.6 Calendar
National Institute on Aging	\$50,000,000	months

The LIFE Study

The major goals of this project are to investigate the effects of physical activity on mobility and independence in sedentary and frail adults aged 70 and older.

No number assigned (Tucker)

University of Florida, College of Medicine

10/01/2008-09/30/2013

\$60,437

1.2 Calendar
months

Establishment of a Center for Health Disparities

The major goals of this project are to develop infrastructure for submission of a research center to investigate and intervene to reduce health disparities among diverse adults.

T32 AG020499 (Marsiske)

National Institute on Aging

05/01/2008-04/30/2013

\$1,142,088

0 Calendar
months

Physical, Cognitive and Mental Health in Social Context

The major goals of this project are to train pre-doctoral researchers in the behavioral theories, methodologies and analyses needed to address questions of health, independence and functioning in older adults.

Completed Research Support (emphasis on training support)

U01 AG014276 (Marsiske)

National Institute on Aging

05/01/2008-03/31/2013

\$890,157

3.6 Calendar
months

ACTIVE Phase III: UF/WSU Field Site

The major goals of this project are to investigate the long term effects of cognitive training on everyday functioning, independence and well-being in older adults.

No number assigned (Anton/Manini)

McKnight Brain Institute

02/01/2008-01/31/2012

\$100,000

0 Calendar
months

Resveratrol supplementation to improve memory and physical dysfunction in older adults

The major goals of this project are to investigate the effects of resveratrol supplementation on cognitive performance and inflammatory markers in older adults.

64441 (Belchior/Marsiske)

Robert Wood Johnson Foundation

05/01/2008-07/31/2010

\$99,982

1.2 Calendar
months

Action video games to improve everyday cognitive function in older adults

The major goals of this project are to investigate the effect of an action video game-based intervention on the visual attention and processing of older adults

F31 AG034002 (Sisco)

National Institute on Aging

1/1/2010-12/31/2011

\$75,606

0 Calendar
months

Neighborhood Influences In Cognitive Level And Training Gains In The ACTIVE Study

The major goals of this NRSA predoctoral training grant are to investigate whether neighborhood characteristics (socioeconomic position, facilities supporting health and psychological function) of ACTIVE participants are associated with their baseline cognitive function and/or response to initial training.

F31 AG032802 (Dzierzewski, co-mentor McCrae)

National Institute on Aging

05/21/2009-05/20/2011

\$87,831

0 Calendar
months

Predicting Cognitive Inconsistency From Physical Activity And Sleep In Late-Life

The major goals of this NRSA predoctoral training grant are to investigate the coupling of cognition, sleep and activity engagement over an 18-week period in a sample of sedentary midlife and older adults.

U01 AG014276-S1 (Marsiske, for Belchior)

National Institute on Aging

9/30/2008-4/30/2010

\$76,909

0 Calendar
months

ACTIVE Phase III: UF/WSU Field Site: Supplement for Diversity

The major goals of this supplement were for the postdoctoral trainee, Patricia Belchior, to investigate transfer to everyday cognitive outcomes in the ACTIVE study. Methods included propensity score weighting, categorical approaches to studying change, and higher order growth curve models.

Current and Pending Support

ACTIVE

P30 AG028740 (Pahor; Marsiske Core Leader)	06/01/2007-03/31/2017	1.2 Calendar months
National Institute on Aging	\$8,011,000	

Claude Denson Pepper Older Americans Independence Center

The major goals of this project are to provide infrastructure (administration, recruitment, clinical/pilot/developmental research support, biostatistics/data management) for research on the overarching themes of Sarcopenia and Disability

D0339-I (Levy)	05/01/2013-04/30/2016	1.2 Calendar months
Veterans Administration Rehabilitation Research and Development Service	\$824,839	

Virtual Environments for Therapeutic Solutions (VETS) mTBI/PTSD Phase II

In the service of ecologically valid cognitive/emotional assessment for veterans, two virtual environments (including a supermarket) will be developed. These environments will serve as the platform for tasks including visual search, price comparisons, change making, etc. The platform will support future research on therapeutic efficacy, and may be generalizable to other populations

U01 AG022376 (Pahor)	09/01/2009-08/31/2014	0.6 Calendar months
National Institute on Aging	\$50,000,000	

The LIFE Study

The major goals of this project are to investigate the effects of physical activity on mobility and independence in sedentary and frail adults aged 70 and older.

No number assigned (Tucker)	10/01/2008-09/30/2013	1.2 Calendar months
University of Florida, College of Medicine	\$60,437	

Establishment of a Center for Health Disparities

The major goals of this project are to develop infrastructure for submission of a research center to investigate and intervene to reduce health disparities among diverse adults.

T32 AG020499 (Marsiske)	05/01/2008-04/30/2014	0 Calendar months
National Institute on Aging	\$1,142,088	

Physical, Cognitive and Mental Health in Social Context

The major goals of this project are to train pre-doctoral researchers in the behavioral theories, methodologies and analyses needed to address questions of health, independence and functioning in older adults.

OVERLAP

None

PHS 398 TRAINING BUDGET, Period 1

Organizational DUNS: 969663814 Budget Type: Project

Organization Name: University of Florida Board of Trustees

Start Date: 2014-05-01 End Date: 2015-04-30

A. Stipends, Tuition/Fees

Number Full Time	Short Term									Stipends Requested (\$)	Tuition/Fees Requested (\$)	
		<u>Undergraduate:</u>	<i>Number Per Stipend Level:</i>									
			<i>First-Year/Soph.</i>			<i>Junior/Senior</i>						
		<u>Predoctoral:</u>										
<u>6</u>		Single Degree								<u>132,192.00</u>	<u>115,776.00</u>	
		Dual Degree								<u>0.00</u>	<u>0.00</u>	
<u>6</u>		Total Predoctoral								<u>132,192.00</u>	<u>115,776.00</u>	
		<u>Postdoctoral:</u>	<i>Number Per Stipend Level:</i>									
			0	1	2	3	4	5	6	7		
		Non-degree Seeking										
		Degree Seeking										
		Total Postdoctoral										
		<u>Other:</u>										
										Totals:	<u>132,192.00</u>	<u>115,776.00</u>
										Total Stipends + Tuition/Fees Requested	<u>247,968.00</u>	

B. Other Direct Costs

											Funds Requested (\$)
Trainee Travel											<u>6,000.00</u>
Training Related Expenses											<u>25,200.00</u>
Total Direct Costs from R&R Budget Form (if applicable)											
Consortium Training Costs (if applicable)											
										Total Other Direct Costs Requested	<u>31,200.00</u>

C. Total Direct Costs Requested (A + B)

											Funds Requested (\$)
										Total Direct Costs Requested	<u>279,168.00</u>

D. Indirect Costs

	Indirect Cost Type	Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
	<u>o. NIH Training Grants</u>	<u>8.00</u>	<u>163,392.00</u>	<u>13,071.00</u>
			<i>Total Indirect Costs Requested</i>	<i>13,071.00</i>

E. Total Direct and Indirect Costs Requested (C + D)

						Funds Requested (\$)
Total Direct and Indirect Costs Requested						<u>292,239.00</u>

F. Budget Justification

File Name: Budget_Justification1002950716.pdf Mime Type: application/pdf

PHS 398 TRAINING BUDGET, Period 2

Organizational DUNS: 969663814 Budget Type: Project

Organization Name: University of Florida Board of Trustees

Start Date: 2015-05-01 End Date: 2016-04-30

A. Stipends, Tuition/Fees

Number Full Time	Short Term									Stipends Requested (\$)	Tuition/Fees Requested (\$)		
		<u>Undergraduate:</u>		<i>Number Per Stipend Level:</i>									
				<i>First-Year/Soph.</i>			<i>Junior/Senior</i>						
		<u>Predoctoral:</u>											
<u>6</u>		Single Degree										<u>132,192.00</u>	<u>133,056.00</u>
		Dual Degree											
<u>6</u>		Total Predoctoral										<u>132,192.00</u>	<u>133,056.00</u>
		<u>Postdoctoral:</u>		<i>Number Per Stipend Level:</i>									
				0	1	2	3	4	5	6	7		
		Non-degree Seeking											
		Degree Seeking											
		Total Postdoctoral											
		<u>Other:</u>											

B. Other Direct Costs

	Funds Requested (\$)
Trainee Travel	<u>6,000.00</u>
Training Related Expenses	<u>25,200.00</u>
Total Direct Costs from R&R Budget Form (if applicable)	
Consortium Training Costs (if applicable)	
Total Other Direct Costs Requested	31,200.00

C. Total Direct Costs Requested (A + B)

											Funds Requested (\$)
										Total Direct Costs Requested	<u>296,448.00</u>

D. Indirect Costs

		Indirect Cost Type		Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
		<u>o. NIH Training Grants</u>		<u>8.00</u>	<u>163,392.00</u>	<u>13,071.00</u>
						Total Indirect Costs Requested
						<u>13,071.00</u>

E. Total Direct and Indirect Costs Requested (C + D)

						Funds Requested (\$)
						Total Direct and Indirect Costs Requested
						<u>309,519.00</u>

F. Budget Justification

File Name: Budget_Justification1002950716.pdf Mime Type: application/pdf

PHS 398 TRAINING BUDGET, Period 3

Organizational DUNS: 969663814 Budget Type: Project

Organization Name: University of Florida Board of Trustees

Start Date: 2016-05-01 End Date: 2017-04-30

A. Stipends, Tuition/Fees

Number Full Time	Short Term									Stipends Requested (\$)	Tuition/Fees Requested (\$)	
		<u>Undergraduate:</u>	<i>Number Per Stipend Level:</i>									
			<i>First-Year/Soph.</i>			<i>Junior/Senior</i>						
		<u>Predoctoral:</u>										
<u>6</u>		Single Degree								<u>132,192.00</u>	<u>153,024.00</u>	
		Dual Degree										
<u>6</u>		Total Predoctoral								<u>132,192.00</u>	<u>153,024.00</u>	
		<u>Postdoctoral:</u>	<i>Number Per Stipend Level:</i>									
			0	1	2	3	4	5	6	7		
		Non-degree Seeking										
		Degree Seeking										
		Total Postdoctoral										
		<u>Other:</u>										
										Totals:	<u>132,192.00</u>	<u>153,024.00</u>
										Total Stipends + Tuition/Fees Requested	<u>285,216.00</u>	

B. Other Direct Costs

											Funds Requested (\$)
Trainee Travel											<u>6,000.00</u>
Training Related Expenses											<u>25,200.00</u>
Total Direct Costs from R&R Budget Form (if applicable)											
Consortium Training Costs (if applicable)											
										Total Other Direct Costs Requested	<u>31,200.00</u>

C. Total Direct Costs Requested (A + B)

											Funds Requested (\$)
										Total Direct Costs Requested	<u>316,416.00</u>

D. Indirect Costs

		Indirect Cost Type		Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
		<u>o. NIH Training Grants</u>		<u>8.00</u>	<u>163,392.00</u>	<u>13,071.00</u>
						Total Indirect Costs Requested
						<u>13,071.00</u>

E. Total Direct and Indirect Costs Requested (C + D)

						Funds Requested (\$)
						Total Direct and Indirect Costs Requested
						<u>329,487.00</u>

F. Budget Justification

File Name: Budget_Justification1002950716.pdf Mime Type: application/pdf

PHS 398 TRAINING BUDGET, Period 4

Organizational DUNS: 969663814 Budget Type: Project

Organization Name: University of Florida Board of Trustees

Start Date: 2017-05-01 End Date: 2018-04-30

A. Stipends, Tuition/Fees

Number Full Time	Short Term											Stipends Requested (\$)	Tuition/Fees Requested (\$)
		<u>Undergraduate:</u>		<i>Number Per Stipend Level:</i>									
				<i>First-Year/Soph.</i>				<i>Junior/Senior</i>					
		<u>Predoctoral:</u>											
<u>6</u>		Single Degree										<u>132,192.00</u>	<u>175,872.00</u>
		Dual Degree											
<u>6</u>		Total Predoctoral										<u>132,192.00</u>	<u>175,872.00</u>
		<u>Postdoctoral:</u>		<i>Number Per Stipend Level:</i>									
				0	1	2	3	4	5	6	7		
		Non-degree Seeking											
		Degree Seeking											
		Total Postdoctoral											
		<u>Other:</u>											

B. Other Direct Costs

											Funds Requested (\$)
Trainee Travel											<u>6,000.00</u>
Training Related Expenses											<u>25,200.00</u>
Total Direct Costs from R&R Budget Form (if applicable)											
Consortium Training Costs (if applicable)											
										Total Other Direct Costs Requested	<u>31,200.00</u>

C. Total Direct Costs Requested (A + B)

											Funds Requested (\$)
										Total Direct Costs Requested	<u>339,264.00</u>

D. Indirect Costs

		Indirect Cost Type		Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
		<u>o. NIH Training Grants</u>		<u>8.00</u>	<u>163,392.00</u>	<u>13,071.00</u>
						Total Indirect Costs Requested
						<u>13,071.00</u>

E. Total Direct and Indirect Costs Requested (C + D)

						Funds Requested (\$)
						Total Direct and Indirect Costs Requested
						<u>352,335.00</u>

F. Budget Justification

File Name: Budget_Justification1002950716.pdf Mime Type: application/pdf

PHS 398 TRAINING BUDGET, Period 5

Organizational DUNS: 969663814 Budget Type: Project

Organization Name: University of Florida Board of Trustees

Start Date: 2018-05-01 End Date: 2019-04-30

A. Stipends, Tuition/Fees

Number Full Time	Short Term									Stipends Requested (\$)	Tuition/Fees Requested (\$)
		<u>Undergraduate:</u>		<i>Number Per Stipend Level:</i>							
				<i>First-Year/Soph.</i>			<i>Junior/Senior</i>				
		<u>Predoctoral:</u>									
<u>6</u>		Single Degree								<u>132,192.00</u>	<u>202,368.00</u>
		Dual Degree									
<u>6</u>		Total Predoctoral								<u>132,192.00</u>	<u>202,368.00</u>
		<u>Postdoctoral:</u>		<i>Number Per Stipend Level:</i>							
				0	1	2	3	4	5	6	7
		Non-degree Seeking									
		Degree Seeking									
		Total Postdoctoral									
		<u>Other:</u>									

B. Other Direct Costs

											Funds Requested (\$)
Trainee Travel											<u>6,000.00</u>
Training Related Expenses											<u>25,200.00</u>
Total Direct Costs from R&R Budget Form (if applicable)											
Consortium Training Costs (if applicable)											
										Total Other Direct Costs Requested	<u>31,200.00</u>

C. Total Direct Costs Requested (A + B)

											Funds Requested (\$)
										Total Direct Costs Requested	<u>365,760.00</u>

D. Indirect Costs

		Indirect Cost Type		Indirect Cost Rate (%)	Indirect Cost Base (\$)	Funds Requested (\$)
		<u>o. NIH Training Grants</u>		<u>8.00</u>	<u>163,392.00</u>	<u>13,071.00</u>
						Total Indirect Costs Requested
						<u>13,071.00</u>

E. Total Direct and Indirect Costs Requested (C + D)

						Funds Requested (\$)
						Total Direct and Indirect Costs Requested
						<u>378,831.00</u>

F. Budget Justification

File Name: Budget_Justification1002950716.pdf Mime Type: application/pdf

PHS 398 TRAINING BUDGET, Cumulative Budget

Organizational DUNS: 969663814 Budget Type: Project

Organization Name: University of Florida Board of Trustees

A. Stipends, Tuition/Fees

	Stipends Requested (\$)	Tuition/Fees Requested (\$)
<u>Undergraduate:</u>		
<u>Predoctoral:</u>		
Single Degree	<u>660,960.00</u>	<u>780,096.00</u>
Dual Degree	<u>0.00</u>	<u>0.00</u>
Total Predoctoral	<u>660,960.00</u>	<u>780,096.00</u>
<u>Postdoctoral:</u>		
Non-degree Seeking		
Degree Seeking		
Total Postdoctoral		
<u>Other:</u>		
Totals:	<u>660,960.00</u>	<u>780,096.00</u>
Total Stipends + Tuition/Fees Requested		<u>1,441,056.00</u>

B. Other Direct Costs

	Funds Requested (\$)
Trainee Travel	<u>30,000.00</u>
Training Related Expenses	<u>126,000.00</u>
Total Direct Costs from R&R Budget Form (if applicable)	
Consortium Training Costs (if applicable)	
Total Other Direct Costs Requested	<u>156,000.00</u>

C. Total Direct Costs Requested (A + B)

	Funds Requested (\$)
Total Direct Costs Requested	<u>1,597,056.00</u>

D. Indirect Costs

	Funds Requested (\$)
Total Indirect Costs Requested	<u>65,355.00</u>

E. Total Direct and Indirect Costs Requested (C + D)

	Funds Requested (\$)
Total Direct and Indirect Costs Requested	<u>1,662,411.00</u>

F. Budget Justification

File Name: Budget_Justification1002950716.pdf

Mime Type: application/pdf

Budget Justification

SENIOR / KEY PERSONNEL N/A

OTHER PERSONNEL N/A

EQUIPMENT DESCRIPTION N/A

TRAVEL

Travel is budgeted at the allowable rate of \$1,000 per trainee per year. Total travel expenses are budgeted as follows: Year 1: \$6,000 (6 trainees); Year 2: \$6,000 (6 trainees); Year 3: \$6,000 (6 trainees); Year 4: \$6,000 (6 trainees); Year 5: \$6,000 (6 trainees).

TRAINEE RELATED COSTS

Trainee related costs are budgeted at the allowable rate of \$4,200 per trainee per year. Total trainee expenses are budgeted as follows: Year 1: \$25,200 (6 trainees); Year 2: \$25,200 (6 trainees); Year 3: \$25,200 (6 trainees); Year 4: \$25,200 (6 trainees); Year 5: \$25,200 (6 trainees).

Included in the above amounts are expected expenses for health insurance, as shown here:

At University of Florida, with 3% annual inflation over base, the expected insurance costs, to be taken from trainee-related costs, are as follows:

	Y01	Y02	Y03	Y04	Y05
Cost per trainee	1346	1386	1428	1471	1515
# trainees	6	6	6	6	6
Total cost	8076	8316	8568	8826	9090

OTHER DIRECT COSTS

Materials and Supplies N/A

Publication Costs N/A

Consultant Services N/A

ADP / Computer Services N/A

Subawards / Consortium / Contractual Costs N/A

Equipment or Facility Rental N/A

Alterations and Renovations N/A

OTHER EXPENSES

STIPENDS

Stipends are shown at the current NIA Level 0 for all years.

Predoc- toral Stipends	# of Trainees	Cost per Trainee	Y01- FY13	Y02- FY14	Y03- FY15	Y04- FY16	Y05- FY17
PreDocs	6	22,032	132,192				
PreDocs	6	22,032		132,192			
PreDocs	6	22,032			132,192		
PreDocs	6	22,032				132,192	
PreDocs	6	22,032					132,192

TUITION AND FEES

Tuition is inflated at 15% annual, and shown in this justification.

Tuition (15% escalation in out yrs)	# of Trainees	Cost per Trainee	Y01-FY13	Y02-FY14	Y03-FY15	Y04-FY16	Y05-FY17
PreDocs (32 credits)	6	516	99,072				
PreDocs (32 credits)	6	593		113,856			
PreDocs (32 credits)	6	682			130,944		
PreDocs (32 credits)	6	784				150,528	
PreDocs (32 credits)	6	902					173,184
Tuition Total			99,072	113,856	130,944	150,528	173,184
Fees (15% escalation in out years)	# of Trainees	Cost per Trainee	Y01-FY13	Y02-FY14	Y03-FY15	Y04-FY16	Y05-FY17
PreDocs (32 credits)	6	87	16,704				
PreDocs (32 credits)	6	100		19,200			
PreDocs (32 credits)	6	115			22,080		
PreDocs (32 credits)	6	132				25,344	
PreDocs (32 credits)	6	152					29,184
Fees Total			16,704	19,200	22,080	25,344	29,184

INDIRECT COSTS

Indirect costs are figured at the allowable 8% rate, and figured on the Modified Total Direct Cost Base (excluding tuition).

TRAINING SUBAWARD BUDGET ATTACHMENT(S) FORM

No Training Subawards are attached.

PHS 398 Cover Page Supplement

1. Project Director / Principal Investigator (PD/PI)

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:

2. Human Subjects

Clinical Trial? ☐ No ☐ Yes

* Agency-Defined Phase III Clinical Trial? ☐ No ☐ Yes

3. Applicant Organization Contact

Person to be contacted on matters involving this application

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:
* Phone Number: Fax Number:
Email:

* Title:

* Street1:
Street2:
* City:
County:
* State:
Province:
* Country: * Zip / Postal Code:

PHS 398 Cover Page Supplement

4. Human Embryonic Stem Cells

* Does the proposed project involve human embryonic stem cells?

☒ No ☐ Yes

If the proposed project involves human embryonic stem cells, list below the registration number of the specific cell line(s) from the following list: <http://stemcells.nih.gov/registry/index.asp> . Or, if a specific stem cell line cannot be referenced at this time, please check the box indicating that one from the registry will be used:

Cell Line(s):

☐ Specific stem cell line cannot be referenced at this time. One from the registry will be used.

[illegible]

PHS 398 Research Training Program Plan

1. Application Type:

From SF424 (R&R) Cover Page. The response provided on that page, regarding the type of application being submitted, is repeated here for your reference, as you attach the appropriate sections of the research training program plan.

☐ New ☒ Resubmission ☐ Renewal ☐ Continuation ☐ Revision

2. Research Training Program Plan Attachments:

Please attach applicable sections of the research training program plan, below.

1. Introduction to Application (for <i>REVISION</i> or <i>RESUBMISSION</i> applications only)	IntroductiontotheRevisedApplica
2. Background	IntroductiontotheRevisedApplica
3. Program Plan	ProgramPlan
4. Recruitment and Retention Plan to Enhance Diversity	RecruitmentRetentionDiversity
5. Plan for Instruction in the Responsible Conduct of Research	Responsible_Conduct_Of_Research
6. Progress Report (for <i>RENEWAL</i> applications only)	ProgressReport
7. Human Subjects	Human_Subjects
8. Vertebrate Animals	Not_applicable
9. Select Agent Research	Not_applicable
10. Multiple PD/PI Leadership Plan (if applicable)	Not_applicable
11. Consortium/Contractual Arrangements	Not_applicable
12. Participating Faculty Biosketches	Biosketches
13. Data Tables	DataTables
14. Letters of Support	LettersOfSupport
15. Appendix	(1 Appendix Attachments)

Introduction to the Revised Application

We thank the previous reviewers for both a generally positive evaluation, and specific suggestions for clarification and revision. New text in this revision is signified by a vertical line in the left margin.

Questions about training director

1. **Training director's rank.** Tenured since 2007, the proposal and letter from Marsiske's chair indicates that he is free to pursue promotion to Full Professor when ready, and may do so in the next year. Reviewers noted that Marsiske's rank has not disadvantaged the training program. Since the first submission, he won both the UF doctoral mentor award and was awarded a UF Research Foundation professorship.
2. **Training director may be spread too thin.** The T32 is serviced by a four-person leadership team, distributing workload. Reviewers noted the T32 has not felt any negative consequences from his workload.
3. **Training director funding.** Current and pending funding are explicated; Marsiske remains heavily involved with funded aging research as PI and co-PI. Moreover, looking more broadly, many mentors have been awarded substantial funding that will cover them well into the period of this award, if granted.

Questions about training faculty

4. **There was concern that trainees were distributed among too few mentees and departments.** Alternatively, there was a concern that there may be too many mentors for only six slots. There have been 15 primary mentees for 26 trainees; Distribution and justification is further detailed in the proposal; including the stronger concentration of aging research faculty in several key departments. We have further thinned the ranks of the training faculty in this resubmission, in part due to faculty departures from UF, and in part to reflect those departments where aging research mentorship is most active. However, not all mentors play the same roles. Specifically:
5. **Questions about the classification of some faculty** (e.g., why can some faculty not mentor doctoral students?). Further clarification of role assignments is added to the proposal; generally speaking, faculty without a recent record of funding are not permitted to serve as primary mentors, but may serve teaching and secondary mentoring committee roles.
6. **Variation in mentors' scholarly impact and funded status.** This was recognized by past reviewers; in the resubmission, we clarify that this is the basis for our sub-classifications of participating faculty (Primary Mentors, Mentors in Training, Teaching Faculty)
7. **Some departments have fewer faculty participants; how does this affect mentoring team composition?** Disiplinary distribution of mentors is Aging (6); Applied Physiology and Kinesiology (1); Clinical and Health Psychology (9); Epidemiology (1); Neuroscience and Neurology (1); Nursing (3) Psychology (4); Rehabilitation Sciences (1); Speech Language Hearing (1). Mentoring teams are not adversely affected: the Department of Aging includes several physiologists; psychology / neuroscience / rehabilitation science / speech-language-hearing overlap strongly in cognitive aging and dementia focus.

Questions about program rules and focus

8. **Shift in direction/focus of the program.** An evolution from a purely behavioral/social focus to one more centered around cognitive and physical antecedents of late life disability reflects emerging areas of substantial strength at UF (a Pepper Center and a Cognitive Aging and Memory Center). We have taken the position that the T32 must evolve to reflect areas of strength at this institution.
9. **Trainee-mentor matching.** Questions about this process persisted; the resubmission further explicates this process; mentors usually identify prospective trainees, and mentoring teams are selected according to several criteria detailed below.
10. **How is community fostered among mentors?** Our weekly colloquium is a key venue for faculty to come together, but our resubmission proposes several new venues designed to bring faculty together.

Questions about trainee credentials and outcomes

11. **Record of placement of trainees in research positions outside of UF.** As shown in Table 12A, only three of 26 trainees have been placed at UF; one (Vonetta Dotson) was recruited back to UF after a national search.
12. **Continued participation in aging research after graduation.** As the progress report more clearly specifies, distribution of current and past trainee work is as follows: Aging and age-related neurodegenerative disease: 21; Lifespan:1; Teaching: 1; Basic Science:2; Private Practice:1
13. **There were questions about the productivity, academic credentials (GRE, GPA), etc. of trainees.** We clarify these points more in the training plan and progress report by providing a supplemental table focused only on our trainees. Mean undergraduate GPA is 3.67; graduate GPA is 3.95, GRE-V is 619, and GRE-Q is 670. We also propose possible revisions to our future trainee selection that will emphasize higher credentials at entry. 30% of our trainees are from under-represented minority groups.

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Program plan

Program Administration

Like all training programs, the UF aging training program is under the guidance of a training director, Michael Marsiske, Associate Professor and Associate Chair for Research in the Department of Clinical and Health Psychology. While Dr. Marsiske has primary oversight of the training program, the UF program benefits from a strong management team approach. Dr. Marsiske works closely a subset of the Core Training Faculty, each of whom has primary responsibility for a particular training Core Activity. Core activities are described further below. The **Program Director** coordinates the activities of the **Graduate Recruitment and Training Committee**. Membership and responsibilities are delineated below.

Program director's qualifications

Since 1995, Michael Marsiske has been actively involved in pre-doctoral student training, and its formal and informal leadership. As the Table below shows, his leadership in training and other domains has well-qualified him for the oversight role on this project. He has been the Principal Investigator of over \$3 million in funding from the National Institute on Aging and other sources (with pre-doctoral training positions as an important component of each funded project), and he has been a co-investigator on an additional \$25 million in externally funded research, with several additional collaborative proposals under review. In addition to the trainees documented in this proposal, Marsiske has chaired 12 doctoral committees, five of whom have gone on to tenured or tenure-track research faculty positions, four of whom are currently in research postdoctoral fellowships, and three of whom are still in training. Almost all of Marsiske's students have achieved independent funding while still in training with him (one R03 as co-PI, two AARP Fellowships, two diversity-focused dissertation awards, two diversity supplement awards [one predoctoral and one postdoctoral], and two NRSAs). Three of Marsiske's 12 trainees have been women from under-represented minority groups. Marsiske has participated as a Chair or Member in 90 graduate student committees at UF.

Dr. Marsiske has been active nationally, and is a member of the editorial board of Aging, Cognition and Neuropsychology; he has chaired the NIA Initial Review Group "Behavioral and Social Science of Aging". Marsiske has been a member of the Executive Committee of Division 20 (Adult Development and Aging) of the American Psychological Association since 1995. At the University of Florida, in addition to his Associate Chair role, he is Recruitment, Adherence and Retention Core Leader for the UF OAIC. His a continuing Principal Investigator and Steering Committee Member of the National Institute on Aging ACTIVE Clinical Trial Marsiske will dedicate 10% of his effort to administration of this training program.

Marsiske's training chronology

Year	Activity
1995	Charter member, Graduate Recruitment and Training Committee (GRTC), Institute of Gerontology, Wayne State University; author of "mentoring statement" with input from GRTC
1995-2000	Member, then chair, of Developmental Psychology Graduate Student Selection Committee, Wayne State University
1996	Successfully recruited Jennifer Margrett and Jason Allaire into training program; ACTIVE study funded, with two predoctoral training slots
1999	Margrett Ph.D. completed and successfully placed
2000	Associate Director for Research, Institute on Aging, University of Florida; implement predoctoral training program
2001	Marsiske proposes, receives, and begins to administer the University of Florida Provost's Award for Predoctoral Research in Aging
2001	Allaire Ph.D. completed and successfully placed; beginning of internally funded predoctoral training program: first seven UF trainees entered
2001-2003	Marsiske joins NIA-S Initial Review Group, with responsibility for review of junior faculty awards (R03), K-awards, and minority dissertation awards
2002	Marsiske begins mentorship of Karin McCoy; second five internally-funded UF trainees entered
2003-present	NIA T32 training grant received; Marsiske form and develops training committee

Year	Activity
2003-2005	Marsiske assumes Chair position of NIAs, with continuing review responsibilities for K-awards, and minority dissertation awards
2003	Marsiske begins mentorship of Adrienne Aiken and Sarah Cook
2004	Marsiske begins co-mentorship (with William Perlstein) of Vonetta Jones Dotson
2004	Aiken receives Minority Supplement Award (ACTIVE parent grant)
2004	Dotson receives NIA R03 minority dissertation award,
2005	Cook received AARP Doctoral Student Scholarship; McCoy Ph.D. completed and successfully placed (VA internship, then post-doc)
2006	Marsiske begins co-mentorship (with Christina McCrae) of Joseph Dzierzewski; Dzierzewski receives American Psychological Association Division 20 (Adult Development and Aging) Master's Thesis Award
2006	Marsiske assumes chair position for college (Public Health and Health Professions) curriculum committee, with oversight of all Ph.D. programs in the College; Marsiske also joins the curriculum committee of the Department of Clinical and Health Psychology
2006	Marsiske assumes Core Leader role for the Recruitment Core of the University of Florida's NIA-funded Pepper Older Adults' Independence Center (OAIC); Marsiske also joins the mentoring core for the OAIC Career Development Core
2006	Marsiske assumes Coordinator position for the University of Florida Network for Biobehavioral and Social Research on Aging; oversees participant registry, proposal development, and curricular support for trainees and faculty
2007	Aiken receives NIA R36 minority dissertation award
2007	Marsiske assumes position of Associate Chair for Research in Department of Clinical and Health Psychology, including oversight of graduate NRSA submissions
2008	T32 renewed
2009	Sisco and Dzierzewski both obtain NIA-funded predoctoral NRSA Awards
2012	OAIC is refunded
2012-2015	Marsiske awarded University of Florida Research Professorship (Vice President for research award for productivity and scholarship)
2013	Marsiske awarded University of Florida Doctoral Mentorship Award (from UF Graduate School) for excellence and productivity in doctoral mentorship

Reviewers of the last draft asked why Marsiske was not yet a Full Professor. Marsiske's first seven years at UF were as Associate Professor, but untenured. **Since 2007, he has been a tenured associate professor.** As the letter of support from his Chair attests, he tentatively **plans to do so in Summer/Fall 2013.** **As reviewers noted, Marsiske's rank has not disadvantaged the training program.**

Administrative structure of the program and the distribution of responsibilities within it

Graduate Recruitment and Training Committee. **Christiaan Leeuwenburgh, Ann Horgas, and Carolyn Tucker** serve as members of the Graduate Recruitment and Training Committee (see below), and serve particular oversight functions with Marsiske. The management team meets monthly, but maintains regular email contact. Functions addressed by each member of the management team are:

Marsiske: Overall oversight and Funding. In addition to overall programmatic oversight for the T32, Marsiske also oversees funding for trainees who wish to enter our mentoring program, but who are not selected for funding by the T32.

Leeuwenburgh (Research Career Development Core Leader, OAIC): Didactic programs (Graduate Certificate in Aging, Colloquium, Monthly Trainee Roundtables, Annual Aging Research Day). Our partner department, Psychology, administers our campus-wide graduate certificate in gerontology. Leeuwenburgh will oversee the Graduate Certificate in Aging, which will be required of all trainees. Dr. Susan Bluck, in Psychology (a member of our Teaching Faculty) conducts annual surveys of aging-courses to be taught across campus, reviews all syllabi for inclusion in the Certificate (and other programs), advises students on enrollment and completion of the Certificate program, and solicits new courses in areas of curricular need. Staff members

who report to Leeuwenburgh (in his role as Research Career Development Core Leader for the OAIC) assist him in organizing colloquia, monthly roundtables, and the Annual Research Day

Horgas (past Associate Dean for Research, College of Nursing): Evaluation and Monitoring. Horgas oversees our tri-annual monitoring plan for current trainees, and our annual data collection from past trainees (**See Appendix C for Evaluation Documents**). Students are evaluated at their application for admission, tri-annually for progress, and then annually for renewed funding. This review is conducted by the Graduate Recruitment and Training Committee. Horgas will coordinate and manage this process. This includes ensuring that all mentoring team meetings are scheduled, that student goal-statements and committee evaluations of trainees are submitted, and that records of all trainee and evaluation materials are kept up to date.

Tucker (Director of the University of Florida Health Disparities Program): Carolyn Tucker has over 30 years of experience conducting culturally sensitive community-participatory health promotion and health care research in racial/ethnic minority and low-income communities. Under her mentorship 42 doctoral students have received their Ph.D. degrees (42% of whom are racial/ethnic minorities), and 40 graduate students have received their Master's degrees (50% of whom are racial/ethnic minorities). Tucker's work has not explicitly focused on aging, but her obesity prevention work has largely centered on middle-aged and older low-income African Americans. As a result, recent collaborations with the OAIC and its investigators (Anton, Manini, and Marsiske) have increased her focus on aging research. Given her substantial record of success with minority recruitment, Tucker has agreed to assist in developing recruitment strategies for identifying promising trainees from under-represented groups; (b) assist in implementing the strategies described in the proposal; (c) consult in the evaluation and retention of trainees; and (d) make suggestions to ensure that the research of trainees is both culturally sensitive and inclusive, to the best extent possible.

The annual schedule and activities of the GRTC are as follows:

Graduate Recruitment and Training Activities

	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>Jun</u>	<u>Jul</u>
Monthly Graduate Recruitment and Training meetings	X	X	X	X	X	X	X	X	X	X	X	X
Weekly colloquium series		X	X	X	X	X	X	X	X	X		
Convene committee and estimate training funding capacity for next year	X	X										
Fall mentoring meetings scheduled and completed; trainee goal statements submitted for review		X										
Purchase mailing lists; identify advertising venues and listservs or websites		X										
Review application materials; establish timeline for applications and review			X									
Meet with graduate coordinators in allied departments				X								
Interim trainee mentoring meetings					X							
Receipt/review of applications					X	X	X					X
Scheduling of trainee phone interviews							X					X
Scheduling of trainee visits								X				X
Offers to trainees								X				X
Spring mentoring meetings									X			
Planning and scheduling of new trainee fall orientation and welcome									X			
Annual review meeting and letters to all trainees											X	
Finalize colloquium/ professional development series for next academic year										X		
"Launch" celebrations for graduating trainees											X	

Reviewers of the previous submission expressed concern that the training director might be “spread thin”, but indeed, this distributed management structure ensure that no one faculty member must carry all the weight of program administration.

Program Faculty

Above, we discussed the three thematic emphases of the training faculty. These are artificial distinctions, because many of the faculty transcends boundaries. The figures below offer two rough schematics to better understand the overlap and collaboration among faculty. On the right is a Venn diagram that represents where groupings of training faculty fall.

The interests of the training faculty can be summarized into three broad substantive themes; consistent with our discussion of the ICF model.

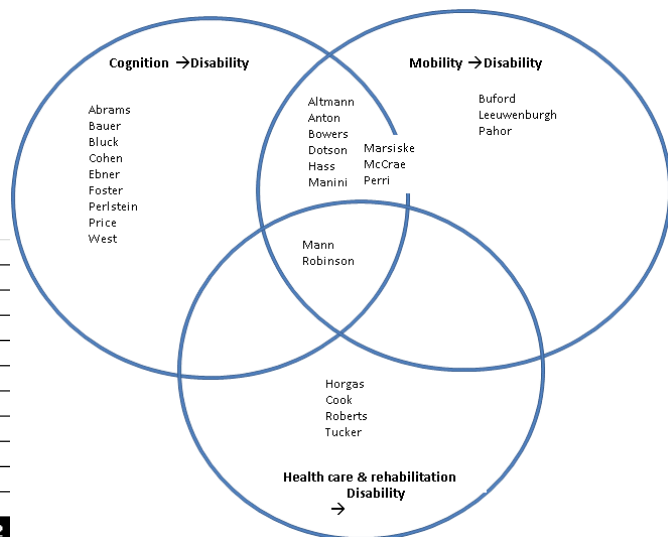
- (a) One set of researchers is largely concerned with **cognitive pathways to disability**. Some study cognition relatively purely, often interested in underlying brain-based or process-based accounts for age-related cognitive losses (Abrams, Bluck, Dotson, Ebner, West, Cohen, Foster, Bauer, Perlstein, and Price).
- (b) Another group is relatively focused on **mobility pathways to disability**. Buford, Pahor and Leewenburgh all study muscular and physiological contributions to mobility changes with age, as well as potential interventions for the remediation of age-associated sarcopenia. At the interface of these two systems is the largest collection of researchers; most of them (Anton, Hass, Manini, Dotson, Marsiske, Bowers, McCrae, Perri, Altmann) are involved in trials that examine whether interventions that improve physical function (exercise, nutritional supplements) also have primary or secondary benefits in terms of improving cognition in demented and non-demented older adults.
- (c) The third group is more health systems focused, usually examining **health system and rehabilitation approaches after the onset of disability** (influences of nursing staffing patterns, discharge practices with caregivers of persons with dementia, implications of health care finance and insurance approaches; Neff). Finally, one group of researchers (Horgas, Roberts, Mann, Tucker, Cook, Robinson) represents the interface of all three themes, asking questions like whether particular medication regimens affect health and functioning in persons with dementia, or whether the provision of technology and assistive devices or community-based health promotion interventions can mitigate the functional effects of decline in underlying body system in adults with and without comorbidities.

In addition to suggesting regions of concentration and overlap, the connection chart among program faculty clearly illustrates that none of our faculty operate in isolation. Linkages (green overlap boxes) represent one or more of (a) shared publications, (b) shared grants, (c) shared grant proposals, and, in some cases (d) co-mentorship or shared trainees.

We believe the figures show, relatively unambiguously, that trainees have a broad exposure to a critical mass of researchers, and are able to profit from multiple laboratories and disciplinary perspectives on research problems of interest. For example, one group of scholars recognized their critical mass in Neuropsychology of Aging (Bauer, Bowers, Cohen, Dotson, Price, Marsiske, and Perlstein) and designed a unique course, which has subsequently become a core team-taught course in our Gerontology Certificate.

Table 2 lists the training faculty for the Program. The mentors for the program are actually divided into three tiers, based on their level of seniority and areas of excellence. Specifically:

1. Persons at the rank of Associate Professor or higher, with current or recent research funding are eligible to serve as **Primary Mentors**. Primary mentors are able to chair dissertation committees, and are permitted to be the preceptors of eligible trainees.
2. Persons at the rank of Assistant Professor or Lecturer, with current funding and who have graduate faculty status are also eligible to serve as Mentors, but they must be supported by a Primary Mentor as co-chair. Such individuals are “Mentors in Training”. Mentors in Training serve both the needs of faculty and trainees. For faculty, it is a way to be socialized into the mentorship role, and to have access to productive collaborative relationships with trainees. The co-chair rule, however, ensures that trainees are protected if the junior mentor is not tenured or otherwise leaves the university. It also ensures that the trainee gets seasoned guidance.

[illegible]

3. Other faculty members, junior or senior, without a recent record of funding are still eligible to participate in training, but as mentoring committee members (not as Primary Mentors or Chairs). These are members of our Teaching Faculty. In addition to providing valuable outside perspectives on trainees' progress, and to provide them with training for the educational component of future academic appointments. Teaching Faculty also serve as instructors for many of our core aging courses. Teaching faculty members are eligible to move to the ranks of Mentors in Training or Primary Mentors (depending on rank) if they become involve in funded research.

1. Currently, as shown in **Table 2, Primary Mentors** (in alphabetical order) are: Altmann, Bauer, Bowers, Cohen, Cook, Foster, Horgas, Leeuwenburgh, Mann, Marsiske, McCrae, Pahor, Perri, Perlstein, Robinson, Tucker,
2. **Mentors in Training** include: Anton, Buford, Dotson, Ebner, Manini, Price
3. **Teaching Faculty** include: Abrams, Bluck, Neff, Roberts, West

Biosketches of all faculty members are shown, by level of faculty, in the Biosketch section of this proposal. **Table 2** explicates the specific research and teaching interests of the faculty. **Table 4** shows currently available funding for each faculty member. **Table 5** shows all trainees for each training faculty member over the past ten years. **Trainees supported by the current T32 are pulled out and shown in the *Progress Report*.** **Table 6** shows each mentor's trainees over the past ten years and representative publications. **To focus only on trainees supported by the T32, please see the *progress report*.**

As evinced by these tables and figures, many of the products of the faculty and their trainees are collaborative, and involve multiple faculty from our training corps, as well as multiple trainees. Collaboration among training faculty is a big component of this research environment. A careful examination of the faculty biosketches at the beginning of this proposal show that (a) most manuscripts and grants are multi-authored/PI'd, (b) most involve students, including trainees from this proposal. In addition, the wealth of centers and institutes at UF,

documented elsewhere in the proposal, provides substantial infrastructure for a highly collaborative environment.

Description of the proposed training program.

1. Students socialized to be collaborators. Students contribute to shaping the research agenda of the UF training faculty, and are assisted in achieving high levels of productivity. An overarching goal is for each student to have a strong record of peer-reviewed research publications and grantspersonship before concluding his or her doctoral studies at the University of Florida. In addition, we encourage trainees to feel accountable to their mentors and research teams for meeting productivity goals. Moreover, our vision for the student does not end at achieving the Ph.D., but at finding their career, and sharing their successes with us for a career-lifetime of productivity. We discuss long-term tracking in the “Evaluation” section below.

2. Research apprenticeship in gerontology. Students conduct research under the supervision of a primary mentor, a faculty member of their choosing who is in the same discipline and who focuses on research in aging. Primary mentors are committed to meeting with trainees at least weekly, and to providing intensive supervision. One feature of our training program is that we also invite junior mentors (identified as “mentors-in-training”) to be active participants in the mentoring program. Junior faculty members have strong productivity demands for their own career advancement, but they also have energy and passion and novel perspectives. We encourage mentors-in-training, and we support them by pairing them with senior mentors for the combined oversight of our predoctoral trainees. Thus, we leverage our T32 programs to train aging researchers at several levels; i.e., both the predoctoral trainees themselves and, in some cases, our more junior faculty mentors.

3. Multi-disciplinary research mentoring group. In addition to close collaboration with the primary mentor, students also assemble a multi-disciplinary group of three to five faculty mentors with whom they meet regularly. Mentors review the students’ academic progress and help them define academic and professional goals. The group of mentors have been selected to represent three complementary functions: (a) the substantive area of inquiry (e.g., pain and aging; family transitions in later life; brain and cognitive aging), (b) a carefully structured (documented below) set of intra- and extra-disciplinary perspectives, and (c) assurance that each faculty mentoring team represents expertise in aging, external funding, publication, and student mentoring (also documented further below). The number and quality of scholars in the field of aging at the University of Florida create a rich environment for learning and opportunities for professional guidance in a wide variety of specialties, as described below.

4. Weekly colloquium and monthly professional development seminars. Students attend weekly seminars, including invited talks by nationally recognized scholars in gerontology. The series of presentations will also include “works in progress” and sessions geared to professional development. The students also receive supplemental instruction in human subjects’ issues, and research and methodology.

5. Outstanding gerontological curriculum offerings. Students are required to enroll in multi-disciplinary courses and/or select specific courses outside their major department, tailored to their interests in the field of aging. Students are required to obtain a Graduate Certificate in Gerontology and/or a Graduate Minor, administered by the UF Network for Biobehavioral and Social Research in Aging. The University of Florida offers over 20 graduate-level courses in aging, including independent study, field work, and research practica in many departments. Per SF-424 instructions, further coursework detail is shown in **Appendix A**.

Requested training level and number of trainees

We request to continue with 6 slots a year. If students are funded for 2-3 years (average/maximum), this would enable a throughput of between 12 and 18 additional scholars by the end of the next cycle.

Describe course work and research opportunities

In addition to pursuing their PhD degrees, trainees are expected to take supplemental coursework in three areas:

Gerontology Certificate: The Certificate constitutes the required curriculum for all Aging Training Program trainees. The Certificate program is intended for students who have a strong gerontology/geriatric focus in their

graduate program and will be completing a master's thesis or doctoral dissertation on aging. Requirements include: (a) Core course (3 credits), GEY 6646: Issues and Concepts in Gerontology; (b) Three additional aging courses (9 credits); at least one from outside home department, typically assumed to cover bio-psycho-social perspectives on aging at the graduate level; (c) Students must achieve B or higher in all courses; (d) complete a major research project on aging (e.g., thesis, dissertation). Approved courses are shown in **Appendix A**. One 3-credit independent study with a research advisor who is *not* the student's mentor may satisfy one course requirement; this fosters breadth of research experience.

Year	Predocs	Total Predocs
Y01	3 (returning)	
	3 (new)	6
Y02	3 (returning)	
	3 (new)	6
Y03	3 (returning)	
	3 (new)	6
Y04	3 (returning)	
	3 (new)	6
Y05	3 (returning)	
	3 (new)	6
# Unique People trained		15

Methodology and Statistics Requirement. A core value of the Core Faculty is that research methodology (qualitative and quantitative) and statistics constitute the critical "toolkit" supporting rigor and excellence in student trainees. Thus, a very high premium is placed on advanced methodological training in all students, and all students are expected to take at least 11 credits of statistics and methodology, selected with the assistance of their mentoring team. prior to the conclusion of

credits, even if this exceeds the departmental expectation. Courses taken to satisfy this requirement in the PhD department will also satisfy this requirement for the training program.

One problem with statistics courses is that few are specific to the study of *change* or *aging*. Beginning in the Spring of 2008, Dr. Marsiske began teaching a course entitled "Best Methods for the Analysis of Change", and all trainees will be encouraged to include this as part of their 11-credit requirement, if their schedules allow. Topics to be surveyed include traditional repeated measures design, test-retest reliability, and sensitivity to change, reliable change indices, longitudinal structural equation models and autoregressive change models, mixed effects models for change, structural equation models latent change, growth pattern mixture models. If time allows, survival analysis and "dual change score" models will also be explored.

Colloquium Requirement. All students are expected to attend the weekly colloquium series. The Institute on Aging Colloquium Series, which is developed in partnership with the Age Network, GRECC, McKnight Brain Institute, and other units on campus, showcases some of state-of-the-art aging research taking place at the University of Florida and other institutions statewide, nationally, and internationally. A cadre of research scientists in the field of aging is invited to give presentations to a multidisciplinary audience of aging scholars. The main goal is to advance the level of aging scholarship within our academic community and the broader field of aging by providing a formalized and regular forum for sharing research findings with one another. Dr. Pahor's Institute on Aging/OAIC and the GRECC place a high value on the colloquium series as its communicative and community-building foundation; it is a fixed line item in the IoA's annual budget. A sample schedule is shown in the **Appendix**.

Addition of a training faculty meeting each semester. One reviewer was concerned that colloquium attendance would be self-selected, and many faculty members might not regularly come together. **In response to this critique, if re-funded, we will initiate once-a-semester meetings of the training faculty. Following a model that is already in place in our Pepper Center, the full corpus of the training faculty will be convened to review mentoring committee reports on all students, and reviews upcoming colloquia, etc. Minutes of these meetings will also be distributed to all non-attendees. This will ensure more regular and cohesive communication among training faculty.** Moreover, this communication will be more focused around trainee review. This will be in addition to the already described meetings of the Graduate Recruitment and Training Committee and external advisory board.

Annual Conference Requirement. Students are expected to present at least one major national conference each year. Although there is latitude in the selection of this conference, the Gerontological Society of America Annual Scientific Meeting is the preferred conference for our trainees. This is the single best conference that

attempts to integrate behavioral and clinical/medical perspectives on aging, and it is the best venue for meeting other students and potential future employers with similar multidisciplinary perspectives.

Extent to which trainees will participate directly in research

Trainees are expected to dedicate 100% of effort to activities associated with pursuit of the PhD degree. Trainees will typically take 12 credit hours each semester, but 3-6 of these will typically be supervised research for course credit. Thus, it is expected that, on average, students will devote at least 80% of their time to activities related to research. Students pursuing clinical degrees would include their clinical and supervision time in the 20% effort devoted to coursework.

Department/Predocutorial T32 integration

The predoctoral program is “value added”, and taken above the requirements of the PhD. Students typically use elective credits in their programs to meet didactic Graduate Certificate obligations. Students are required to take at least 11 credits of statistics/methodology, but this obligation is often largely (if not wholly) met by the methods requirements of the Ph.D. programs themselves. The mentoring committees also yield a structural integration of department/T32 mentorship, as shown below.

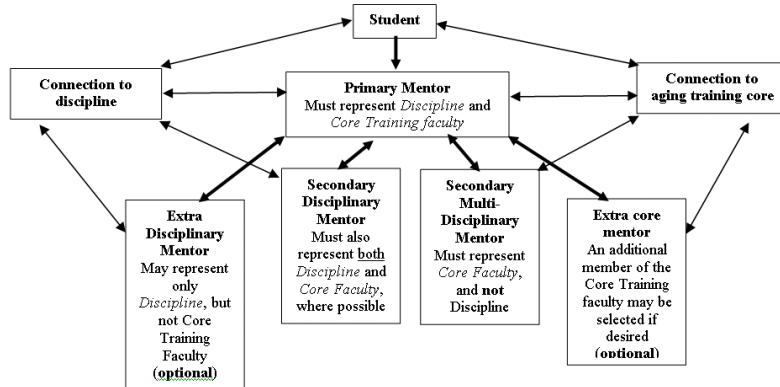
The training program interleaves closely with the degree requirements of the core disciplines. The appendix summarizes Degree requirements in some of our larger core disciplines (e.g., Clinical and Health Psychology, Communication and Speech Disorders, Nursing, Rehabilitation Sciences). A key point to be made is that the rules are largely consistent across departments (a minimum number of courses, specific core and elective courses, an expectation of timely progress and research productivity).

Mentoring Teams as the Vehicle of Integration. A key point is that potential conflicts between PhD departments and the Core Training Faculty are essentially eliminated by the existence of mentoring teams. Since mentoring teams represent faculty voices from the department, from the Core Faculty, and from some faculty who represent both constituencies, integration among units is fundamentally built into the student's primary training context. The insistence that the Primary Mentor reside in both the department and the Core Faculty ensures that he or she is immediately aware of any role conflicts or competing demands between training program and the department (should they arise), and can function as the student's advocate in negotiating compromise. To date, this integrative role has been symbolic, since real conflicts between the training faculty and the units have not yet arisen over student training. The student's primary relationship is with the primary mentor, who represents both the discipline and the Core Faculty. The student interacts, however, with all members of the mentoring team. Some members of the team are disciplinary, and represent the Ph.D. department. Others are multidisciplinary, and ensure that “outside perspectives” in aging are heard and learned. This structure ensures that the student is always embedded within the rules, culture and procedures of both units, and has at least one faculty member who is similarly embedded in both units. In the figure below, Heavy lines represent connections among the mentoring team and with the student. Dashed lines represent relationships with the disciplinary department, the Core Faculty, or both. Secondary disciplinary mentor. A required additional mentor is a representative who is both a member of the Core Faculty, and a representative of the student's PhD discipline. This person provides a second “voice” from the discipline for the student, and also functions as a secondary or backup representative for the student in the department. Like the primary mentor, this person is also a key bridge between the theories and methods of a particular discipline, and the operation or application of these theories and methods in aging research.

Secondary multi-disciplinary mentor. A required additional mentor is a member of the Core Faculty who is not a representative of the students' discipline. This expresses the fundamental belief that most aging phenomena are fundamentally multidisciplinary, and that students must be exposed to perspectives outside their narrow area of study.

Extra disciplinary mentor (optional). In some departments, it may be necessary to include a representative of the department who has no formal affiliation with the training program, especially if the mentoring committee also serves as a doctoral/dissertation committee. This may also be a necessary step to ensure that doctoral studies in the home department and the pre-doctoral training program are integrated and consistent with one another.

Extra core mentor (optional). Some students opt to add an additional member of the Core Faculty, especially if that individual offers another perspective on the student's area of study, or offers other networking benefits (e.g., several female trainees in our first cohort have requested extra female mentoring committee members, to better provide role socialization as a woman in academia).



Disciplinary distribution of mentors is Aging (6); Applied Physiology and Kinesiology (1); Clinical and Health Psychology (9); Epidemiology (1); Neuroscience and Neurology (1); Nursing (3) Psychology (4); Rehabilitation Sciences (1); Speech Language Hearing (1). Mentoring teams are not adversely affected: the Department of Aging includes several physiologists; psychology / neuroscience / rehabilitation science / speech-language-hearing overlap strongly in cognitive aging and dementia focus.

Representative examples of programs for individual trainees.

The Appendix shows a prototypical individual learning plan for a student in two programs (Rehabilitation Science and Clinical and Health Psychology). Since all doctoral programs at the University of Florida require extra-departmental training, program requirements easily accommodate extra gerontological coursework (12 credits) associated with the Graduate Certificate in Gerontology. Not shown are the additional regular commitments of trainees. It is further expected that students will meet with their primary mentors weekly and with their mentoring teams at least once a semester. Aging colloquium meets weekly in Fall Spring, and Summer semesters. Students may also need to take additional statistics/methods courses if they do not meet the 12-credit minimum through their departmental requirements. The tables show curricula, degree requirements, didactic courses, laboratory experiences, qualifying examinations, and other training activities, such as seminars, journal clubs, etc.

Trainee selection and retention criteria

Selection Criteria

To be admitted into the training program, the following general criteria are used:

1. Fit with, and endorsement by, a UF Core Training faculty member. The single most important criterion for admission is close fit with a Core Faculty member. For the current purposes, "fit" is defined as (a) student and mentor's agreement that they have common research interests; (b) student's willingness to conduct a dissertation project that falls within the scope of, and is ideally funded by, the mentor's program of research; and (c) disciplinary similarity between mentor and student. Except in unusual circumstances, mentors and students should represent the same discipline. This ensures that students get appropriate training in the theories, methods and substance of a particular discipline, increasing their future placement probabilities within that discipline. **The mentor is the principle source of recruitment to the T32 program.**
2. Investment in aging as a primary goal. Students must express an interest and desire for aging research, and must commit to a dissertation project on an aging topic, or one that studies aging within a life-span/life course perspective. There is a preference for students with demonstrated interest in aging through coursework, theses, or previous regular participation in the UF Age Network activities.
3. Potential for scholastic productivity. There should be some evidence of productivity potential (i.e., potential to produce successful articles for peer-reviewed journals, to submit grant or fellowship applications, and to present at national conferences in the discipline or in aging). For advanced students, prior publication or presentation is a major indicator. For more junior students, a demonstrated understanding of the importance and goals of productivity is required.
4. Admitted by a UF Department in good standing. Since the Age Network is not a degree-granting body, students must be eligible for, and admitted to, a University of Florida department, and maintain good

standing and full-time registration in that department. For applicants new to the University, applications to the Department and the Aging Training Program may be made simultaneously, but the Age Network will defer any final admission and funding decision until the Department has granted admission.

5. Preference for advanced graduate students. There will be a preference for advanced graduate students. Generally, to gain admission into the program, students should have completed their Masters degree, or show evidence of substantial progress (i.e., certification by a Core Faculty member that a Thesis proposal has been defended, and the Thesis has a firm completion date). This seniority rule protects the training program against those who lose their interest in doctoral study (such as those who terminate study upon receipt of a Masters degree), and ensures that the training program supports serious, research-oriented students and frees them up from other demands (like teaching assistantships). This ability to focus on research can be a critical boost to productivity and timely completion of academic activities which readies students for a competitive job market.
6. Objective test performance. The Core Faculty has made a clear choice to focus on students' whole record, beyond classical indices of potential (GRE, GPA). Several Core Faculty members are psychometricians who fundamentally believe in the predictive ability of such measures; but by generally focusing on more advanced students, the graduate record and commitment to aging must become more important. Thus admission decisions to the training program will not initially be made on the basis of objective test performance (GPA, GREs). Indeed, the first-round review of materials will be blinded to students' performance on these indicators. This is to ensure that the student's application is given a full, qualitative review, and that issues of fit-with-mentor and investment in aging are given primary weight. Of course, the training program is "protected" from sub-standard GREs by the fact that only students who achieve departmental admission (requiring a minimum 1000 Verbal-Quantitative GRE at UF) will be considered. As a final criterion, especially to rank provisionally accepted students for training funding, objective test performance will be considered. Highest probability for funding will be assigned to students who have a minimum combined verbal-quantitative GRE of 1100 or higher, and that at least one of the GRE-Verbal, GRE-Quantitative or GRE-Analytic at a score of 600 or higher.

Although objective test performance is not emphasized, as our progress report shows, students are generally quite strong. Average undergraduate GPA of funded trainees is 3.67, and average graduate GPA is 3.96. On average, funded trainees have a verbal GRE of 619 (old scale) and quantitative GRE of 670 (old scale).

Retention Criteria

As discussed below, all trainees schedule tri-annual (Fall, Spring, Summer) mentoring committee meetings, in which they review their goals and goal progress in the domains of research, education, and service. These interim evaluations are reviewed carefully by the GRTC, but are used as the basis for feedback and suggestions regarding progress and barriers to progress. However, after the summer mentoring committee meeting (usually held in June), the GRTC will review the record for retention. This applies to all trainees, but is most critically applied to funded trainees, where the decision to continue or terminate funding is made.

Based on the feedback of the student's mentoring team, the Graduate Recruitment and Training Committee, under the direction of Dr. Horgas, will conduct an annual review of all funded trainees to determine (a) retention in the program, and (b) eligibility for continued funding. The general presumption is that students, once admitted, will be retained, and that the Core Training Faculty will invest all necessary efforts to remediate students evincing difficulty on one or more of the criteria below. In making the annual evaluations, factors to be considered include:

1. Regular attendance at weekly colloquium. Students are expected to attend the weekly colloquium series, and to arrange for course and teaching schedules that do not conflict with the colloquium. This is the fundamental weekly meeting point for faculty and students, and is assigned highest importance.
2. Regular/weekly meetings with primary mentor. Students and mentors should meet regularly (an ideal frequency is at least weekly, although dyadic variations are expected), and should keep an informal record of their meetings. The close and ongoing contact between students and their primary mentor is necessary to maximize mutual investment in one another.
3. Conduct at three mentoring committee meetings per year. Each student must have at least three meetings each year with a broader multidisciplinary mentoring committee. In the Fall, an initial goal setting meeting establishes measurable, quantifiable goals in the domains of research excellence,

academic and teaching accomplishment, and service/citizenship. A mid-year interim evaluation meeting is also scheduled, as is an end-of-year Summer Review.

4. Positive evaluation by mentoring committee. The student should receive an annual positive evaluation by their mentoring committee. Positive evaluations are expected when students have successfully met, or exceeded, the goals they established with the mentoring team in the Fall. For unattained goals, students and their mentoring team should have a clear understanding of the barriers to their progress, and a remediation plan for the future elimination of those barriers.
5. Productivity requirements. All trainees must submit at least one new national conference abstract, as a first- or later-author, annually. All trainees must submit at least two new peer-reviewed journal manuscripts in each year in the training program. First- or later-authorships are acceptable, although it is generally expected that there will be a shift to first-authored student publications later in the graduate career, as the student increasingly undertakes independent or primary responsibility for areas of research.
6. Satisfactory progress in coursework and curriculum. It is expected that students will maintain at least a 3.0 GPA in all graduate coursework, consistent with UF Graduate School rules. Substantial or repeated below-standard work will be grounds for a remediation plan. It is required that students will enroll in, and complete, a Gerontology Certificate, and at least 11 credits of approved statistics and methodology coursework.
7. Not more than three years. In accordance with PHS rules, the minimum training period for students is expected to be two years. Students should, in general, not receive training grant funding for more than three years. Students who have been unusually productive in publication and grantspersonship, and whose mentoring committee believe that unusual levels of productivity might be further supported by additional time as a pre-doctoral trainee, may petition for an additional year of funding.

Selection of preceptor and how research problems are chosen

Mentoring team formation. The training program is construed as facilitating the development of the next generation of aging researchers. In service of that goal, the mentorship team is envisioned as serving several broad functions, including training in research skills, monitoring of academic progress at University of Florida (both in the disciplinary major, and in the Gerontology Certificate), professional socialization and development of the student, assistance with professional network formation, and career planning and placement assistance. The mentorship team concept is an attempt to go beyond the traditional "supervisor/employee" or "doctoral committee" relationship. Instead, the mentoring team is designed to work with the student to construct the best plan of work, and research activities, to further the student's training. Mentoring teams will be initially proposed by the GRTC, based on an evaluation of balance, fit, and student needs, as well as consultation with the student. Teams will be assigned to students for a period of one-year. At the annual Summer student performance evaluation, the student and team members are asked to evaluate the composition of the committee, and to affirm its continuation for another year (or to suggest a reconstitution).

Since students are admitted, typically, after the qualifying examination, students have typically been admitted with the baccalaureate degree, **and have worked with their primary mentor 2-3 years before being funded. When the student applies to become part of the T32, they do so with the mentor already identified.** In the application for training funding, they elucidate the areas of shared research interest, and the proposed project(s) to be conducted under the T32. The Graduate Recruitment and Training committee then solicits recommendations from the mentee/mentor about secondary mentors (mentoring committee members, although the committee ultimately assigns the secondary mentors. Assignment of secondary mentors is done to assure (a) adequate representation of other discipline members, (b) substantive overlap, (c) where the mentor is junior or less well funded, to ensure that an advisor with high funding/publication productivity is included on the team.

Indeed, we have used our mentors to develop a kind of "farm team" for the development of T32-funded students. *Admission to the training program can occur without funding.* **Unfunded trainees are usually admitted in their second year (around the time they complete their Master's thesis), and participate in all the mentoring and colloquium activities of funded trainees.** Thus, they typically have prior experience with their primary mentor and mentoring team. **The most productive of these unfunded trainees are typically most likely to be admitted to funded trainee status.**

Primary mentor selection. **The primary mentor is usually selected at time of application. In contrast to many traditional departmental units, it is the expectation that students will not "shop around" for a mentor after admission.** While mentors may change, the guiding philosophy of the program is that students will flourish, and show a continuous record of programmatic research, if they enter into a committed, planful, mutually supportive relationship with a mentor, and that relationship endures throughout the graduate career. The broader mentoring team was conceived as a system of division of labor in a multidisciplinary environment. Ultimate responsibility for mentoring the student lies with the primary mentor. Except in unusual circumstances, the primary mentor is the one with whom the student's research interests are most closely aligned, and on whose project the student primarily works. Thus, the primary mentor is given responsibility for (a) summarizing mentoring team recommendations to the student, (b) ensuring frequent and regular supervision of student activity to ensure progress toward performance goals/team recommendations, (c) scheduling ad hoc team meetings when needed, (d) consulting formally or informally with team members, other Core Faculty, and other faculty in the student's discipline, and (e) representing the student, where possible, in departmental performance and progress evaluations, and in program evaluations.

The typical mentoring team will range from three (required minimum) to five (maximum) faculty mentors, including the primary mentor. This section deals with substantive issues in mentoring team selection. The next section details productivity and experience issues that support our team mentoring concept. Substantively, it is expected that this committee will typically also constitute the student's doctoral/dissertation committee in the home department, where allowed, to reduce duplication of committees and an undue number of meetings.

In the previous review, there was a concern about the distribution of trainees across mentors. There have been fifteen primary mentors for 26 listed trainees. Their names, and number of trainees (in parentheses) is listed as follows: Bluck (1), Bowers (4), Cook/Manini (1), Crosson (1), Devine/Foster (1), Diehl (1), Foster (1), Horgas (1), Manini (1), Mann (2), Marsiske (4), McCrae (2), Perlstein (2), Price (1), West (2). While some mentors have had multiple trainees, this is a function of the strongest trainee applicants in a given year, as evaluated by the Graduate Recruitment and Training Committee. Marsiske, as Program Director, recuses himself from trainee selections for his potential mentees. The fact that not all possible primary mentors have had mentees is likely a partial reflection of the small number of available slots (6) in any given year, and the competitive nature of our process, and the fact that we do not allow Teaching Faculty to become primary mentors.

Mentors and Students: Reciprocal Obligations. Beyond the basic academic functions of the mentoring relationship, our notion of mentoring explicitly includes professional socialization, placement, networking and productivity enhancement as key features. We have also placed "Fellow" and "Mentor" **compacts** in the **Appendix**; this is how we strive to formalize accountability.

1. *Socialization of the student in gerontology and in the specific discipline.* Some examples: Students should be encouraged to attend conferences in gerontology and their discipline, to join appropriate professional societies and establish a "home conference". Where the Chair or members of the mentoring team engage in professional activities or community service, the student should be encouraged to join them, or if possible to engage in alternative professional or community service activities. Mentors are a student's "guide" into a discipline, and should lead by example and substantial behavioral modeling.
2. *Networking, outside of UF.* Some examples: Mentors may make a point of making introductions at conferences, and students will be encouraged to introduce themselves. Students should be encouraged to attend student events at UF and professional conferences. Mentors may attend social functions at conferences with the student. Students may be encouraged to join relevant listservs in their field, and to serve on professional committees where possible.
3. *Provide training in a specific research area.* The mentors should help the student to accumulate an active portfolio of research productivity. To function most effectively in the training program environment, the student must develop a record of scholarly productivity as soon as possible, as explicated by the annual publication and presentation expectations. The student must learn how to develop and test research questions, and should be apprenticed through the research process: theoretically motivated research proposals, data collection, data entry, data management, data analysis, report writing and graphics. Independent research must be encouraged, particularly in the thesis and dissertation. It is strongly encouraged that all students submit an independent dissertation research award (e.g., NIMH, NINR,

AHCPR, UF Internal funds) before leaving UF. Mentors will assist actively and collaboratively in the proposal development process.

4. *Career planning and development, and placement.* Mentors must assist in the early formulation of professional goals. For example, students interested in an academic career should start planning early to obtain desirable post-docs, to assemble a programmatic body of research that will lead to a good job talk, to plan for obtaining 3-5 strong letters of recommendation, and to assemble evidence of scholarly productivity (esp. journal articles) and grantpersonship that will assist in the pursuit of employment. Of critical importance is the identification of possible career trajectories as soon as possible, and the accumulation of necessary credentials to facilitate obtaining such positions beginning early during students' time in the training program. At the time of placement, students and mentors can work actively, separately and together, to identify possible positions. For example, in addition to searching published job ads, faculty might offer to write "letters of introduction" to persons the student is interested in working with (especially in post-doctoral contexts). **Our concept of the mentoring relationship is that it does not necessarily end when people leave UF (see evaluation plan below).** Student placement following a post-doctoral fellowship, for example, still relies on the active work of both the student and the mentor. Productive collaborative ties between students and mentors may endure well beyond the student years. If students feel they have profited from, and been well served by, the training environment, then their career success in other environments will help former students to implement our multi-disciplinary mentoring approach if/when they become faculty, and to act as ambassadors for the training program and UF.
5. *Planning for and supervising of progress through the Ph.D. program.* Mentors should make a point of ensuring that they are knowledgeable about the academic requirements of their and their students' departments, and they should work with the student to make sure the student is meeting program requirements. The Primary Mentor's attendance at departmental evaluation, or representation in that evaluation, is desirable where possible. Ideally, mentors would work out an academic plan of work with the student, targeted at completing the Ph.D. program in 2-3 years (for students admitted with a Masters). Timely progress through the academic program will be necessary for renewal of funding.

Guidance and monitoring/evaluation of trainees

Mentoring team operation. It is expected that mentoring teams will convene mid-year, in the Spring, and in the Fall of each year (and at other times, as necessary). The Fall meeting is needed to initiate the mentoring process for the new academic year, and to formulate the goals for the upcoming year. The mid-year meeting is an interim meeting, to ensure that timely progress toward the goals is being made. At the Spring evaluation, the student and the mentoring team will be asked to provide the GRTC with a specific written evaluation of the student's accomplishment of performance goals for the previous academic year. At the beginning of each new academic year, in August, a new set of goals for the upcoming year should be formulated, and progress in the summer term should be evaluated for returning students. Thus, there is independent evaluation of progress and monitoring at least three times a year for all current trainees.

For students who have left the program, we request an annual c.v. update at the time the NIH progress report is due. In the process, the training director sends a program update to trainees. Though informal, this generally yield narrative updates from all graduated trainees. We also ask past trainees to share any observations about strengths and weaknesses of their training, **both at an exit interview with the GRTC**, and in the annual updates.

Goal statements (shown in the Appendix). Students will work with their committees to formulate performance goals for the academic year, and that progress toward these goals will be evaluated throughout the year. Initial performance goals will be the product of individual and group discussions between the student and the mentoring team, and may take several weeks to refine. In general, performance goals should be (a) 4-7 in number, (b) reflect steps toward the successful completion of the degree, and the critical evaluation areas detailed below, (c) be clear and concise, and (d) be measureable. For example, a first-year student might have as goals "to work on substantive research projects with at least three faculty" and/or "participation on at least one abstract submitted for presentation at a national conference", while a second-year student might have as goals "the preparation and defense of a thesis" and/or "the successful completion of two courses toward the Certificate in Gerontology". To guide career development, mentees are asked to start each goal statement with a meta-goal (see **Appendix**, in **Trainee Forms**). The meta-goal lays out (flexible) student-driven

career trajectory. The mentoring committee is asked to use this meta-goal to help shape student productivity goals. For example a trainee seeking a tenure-track position in a research university likely will have much stronger publication and grant goals than other students. The committee is asked to continuously revisit the meta-goal, both to ensure that the student is still “on target”, and that the performance goals and achievement levels match the meta-goal.

Training Program Evaluation

Program evaluation is continuous, done in real time, and from multiple sources. It exists at eight levels, as described here:

Level 1: Mentor: The mentor is expected to meet at least weekly with the trainee. The mentor is the primary director of week-to-week productivity. The mentor is asked, pro-actively, to communicate any concerns in real time to the GRTC.

Level 2: Mentoring team (three annual evaluations). The multidisciplinary mentoring team meets three times a year. At these meetings, they review the meta-goal/goal statement, as well as the student's productivity report (see **Appendix** for form). Students are asked to discuss whether goals were calibrated at a higher level of challenge, and what barriers they might have encountered. The mentor is then asked to draft a brief written report summarizing (a) trainee progress, (b) agreed upon next steps, and (c) any concerns. The mentoring committee and the trainee sign this report, then submit to GRTC.

Level 3: GRTC. Mentoring team reports and productivity statements are reviewed carefully by the entire GRTC after each meeting. In addition to any noted concerns by the mentoring team, the GRTC makes an independent evaluation of the goal statement and productivity report. If the GRTC agrees with what is written, a brief email of agreement is sent. If the GRTC has modification suggestions, these are communicated to the mentor and trainee. Where serious concerns arise, the Program Director will schedule a meeting with the mentor and trainee.

Level 4: Annual trainee meeting with training director. At the end of each appointment year, trainees have an informal individual meeting with the Training Director. This is construed as a confidential way to express concerns or areas of enthusiasm. No formal process for capturing feedback exists here, but qualitative notes and impressions are communicated back to the GRTC.

Level 5: Anonymous online survey. At all times, an anonymous (no IP-recording) survey is available for trainees and mentors to submit concerns that they are not willing to discuss privately. To date, no one has used this process.

Level 6: Exit interview. This is our approach to obtaining feedback from former trainees to help identify weaknesses in the training program and to provide suggestions for program improvements. This is an extension of the annual meeting with the Training Director, but the exit interview is essential, since students may feel freer to discuss concerns, and may have developed a more integrative perspective on their training. In cases where the final days before graduation are rushed/hectic, the exit interview is scheduled via telephone.

Level 7: Post-graduation annual reviews. Each year, at the time of the annual progress report, past trainees are asked (a) to submit an up to date c.v., and (b) are asked to respond to a single qualitative question: “Now that you are away, have you developed any new feelings about the strengths or weaknesses of your training?” Responses are typically communicated via email or telephone, and qualitative notes are shared with the GRTC. Graduates' productivity progress will be included in the annual progress report.

Level 8: External advisory board. Previous incarnations of this T32 did not have an *external* advisory board. This is an error that is being corrected in the current proposal. External evaluators provide invaluable insight into the strength of the program on a national or international scene. As shown in the Letters of Support and Biosketches, we have selected three highly regarded external advisors. These advisors represent disciplines at the core of the training (Muscle strength and disability; cognitive aging and training; health care and nursing perspectives on aging). Advisors are Roger Fielding, Ph.D. (Tufts University), George Rebok, Ph.D. (Johns Hopkins) and Ann Kolanowski, RN, Ph.D. (Penn State University). The advisory board will be sent a draft of the annual progress report (prior to agency submission), along with supplemental information (colloquium

schedules, trainee productivity reports, recruitment and retention outcomes). A telephone conference will be had with the GRTC and the board (faculty and trainees will be invited to attend open portions of the session). The external board will make written recommendations that (a) will be included or summarized in the annual Progress Report, and (b) will be addressed with the Board in subsequent years (i.e., so the board can judge our responsiveness to recommendations).

Examples of outcomes

Although feedback from trainees and mentors has been generally positive, in two instances there was explicit negative feedback about a mentor or mentoring team member. In both cases, the case was brought to the Graduate Recruitment and Training Committee's June meeting for further discussion. In the case of the "problematic mentor", the committee resolved that the chief problems lay with unrealistic expectations of the trainee for what the mentor could provide. The training director then established a meeting with the trainee, and mentoring expectations were explicated and discussed. This resolved the issue. In the case of a "problematic mentoring team member", the GRTC decided that there was poor fit between that team member and the trainee. The committee then opted to reassign the mentoring committee member before the start of the next academic year.

This process has also influenced trainee retention. Two trainees, whose appointments lasted only a single year, showed evidence of low productivity and conducting research that was not aging focused. These problems became apparent by the first mentoring meeting; feedback was provided to the mentor and the trainee. The trainees were carefully tracked in between mentoring meetings. One trainee opted to withdraw from the program when she realized that her goals were not consistent with the productivity goals of the T32 program. The other trainee was not responsive to feedback, and was terminated from the program. These were the only two instances of serious concern in the (hitherto) ten-year life of the program.

Trainee Candidates.

Describe recruitment plans, including the sources and availability of trainees:

Direct recruitment into the T32 is done via students already at UF. To protect the T32 from risk, only students past the first year of doctoral study (and preferably past qualifying examinations, although this is too late for some students, given remaining time in training) are considered for admission to the program. (Some students opt to become unfunded trainees – with all the obligations of trainee status, but no funding; similarly, some trainees are funded only for a year or two, because they fulfilled many training obligations as unfunded trainees; examples in the current cohort of trainees include Matthew Cohen and Daniel Kay).

The GRTC, however, actively recruits outside students who would become eligible for the training program if matriculated. This section describes "broad spectrum" recruitment; the "**plans to enhance diversity**" section, below, elucidates new, stronger efforts to attract students from under-represented minorities.

The Graduate Recruitment and Training Committee is aggressive with regard to recruitment. We have a two-pronged strategy: External vs. Internal. As noted above, to protect the T32 program from "risk", we have always had a preference for advanced students (generally those who have completed at least their first year of doctoral study. For **funding**, we tend to recruit promising students who already at the institution, and who are already unfunded trainees. We do this through a variety of mechanisms: (a) **Communications with all training faculty**, informing them of upcoming T32 competitions (usually in early Spring). (b) Distribution of our T32 competition announcement to a **listserv network** of 300 faculty affiliates (with interests in aging, but who do not belong to the Core Training faculty) (c) **e-mail** of our T32 competition announcement and flyer to all doctoral students (and all incoming/recruited doctoral students) in our partner departments; This is done annually, and messages are repeated from January to March of each year. In addition, Michael Marsiske meets with or telephones the faculty graduate coordinators in each department, and asks them to be aware of strong prospective candidates who could compete for T32 funding.

However, **external recruitment** (i.e., internationally) is needed to develop a "feeder stream" for trainees who will then come to the training program. (Note: Minority recruitment is addressed separately, below). To facilitate external recruitment, we have use the following strategies: (a) Placement of an advertisement (**See Appendix for sample**) in the Gerontology News, typically October/November/December (when new students

are applying for training programs); (b) Mailing of our flyer to several listservs in our constituent disciplines, including Psychology of Aging (APA Division 20, for which Marsiske is moderator), Sociology of Aging, Nursing and Aging, etc.; (c) Direct mail of a solicitation letter to key faculty contacts internationally. These letters are coordinated by the training program, but are sent individually by training faculty. There is an annually updated list of mail addresses, and a boilerplate recruitment letter and flyer. Postal mail is used to maximize impact, and to increase the probability of material being posted.

Table 1 shows the breadth of departments available to support the proposed training. **Table 2** shows the general numbers of faculty, including the existence of critical mass in aging researchers in many of our departments. **Table 4** shows the broad base of grant research available to trainees. What the tables clearly show is that our six slots only scratch the surface of qualified students in every department. All of our trainees have graduated. Of the 26 trainees trained to date, **six** already occupy **faculty** positions in their disciplines of training, and five continue to do research in aging; **eleven** others are currently in **postdoctoral or research** associate positions, which suggest that they remain on research career trajectories. **Seven current trainees** are still in training. Only one candidate has left academia, and reports (in our annual debriefing) that this is for personal reasons, and not related to the training received.

The *progress report*, elsewhere, discusses our existing trainees. In general, our faculty produces a high number of trainees with a mixed, but generally positive, record of productivity. Not surprisingly, most of the trainees funded by our T32 are at the upper end of the productivity distribution as compared to students in our constituent departments overall (**Tables 5 and 6 show all our mentees; the progress report shows only our T32 mentees**). Tables 7 and 8 show the broad base of applicants for most of our partner departments and, where possible, shows the credentials of those persons (coded as "Y") who were appointed to our T32. We discuss this in greater detail in the Progress Report.

Institutional Environment and Commitment to Training.

The table below shows the significant financial support being made available to this T32. As noted above, **all residual tuition is being covered** (i.e., that portion not covered by NIH). Additional infrastructural supports are listed in this table. In addition, **per Letters of Support, significant Training Director (10%) and staff time is being allocated to the management of the program. Letters from the Provost and Vice President for Health Affairs and Director of the CTSI and Institute on Aging further commit** maintenance of didactic opportunities (colloquium, roundables, Certificate program in Gerontology) at no cost to the T32. Not shown in this table is the cost of telephone/internet bandwidth, which is also borne by the institution.

Our **Resources and Environment** section show the strong array of infrastructural resources available to trainees. Participants, through their mentors, can access specialized labs and equipment, and have access to excellent participant recruitment, computing and library resources. **Tables 3 and 4** also strongly show the culture of training grants and the large number of individual research grants that can support trainees. The commitment table above shows that additional support for trainees has been made at the highest levels of the institution.

Institutional Support for UF T32

Year 1 (4 Pre Docs & 6 Post Docs)		
Item	Cost	Provider
Space (DG-84) Sq FT = 195 195 x 1.25 x \$9.35	\$2,279.06	Dean of the College of Public Health and Health Professions/College of Medicine
Tuition (40% not covered) \$572.80 per credit x 32 credits x .40 for 6 Pre Docs	\$43991.04	University of Florida
Gator ID cards \$16.17 x 6	\$97.02	University of Florida
RTS Bus Pass \$35 x 12 months x 6	\$2520.00	University of Florida
UF library accounts	Variable	University of Florida
UF Software: Microsoft Office Suite (\$99x6) , SPSS (\$75x6), SAS (\$65x6), Adobe Acrobat Professional (\$150x6), EndNote (\$125x6), Reference Manager (\$220x6), McAfee VirusScan Enterprise (\$75x6)	\$4854..00	College of Public Health and Health Professions
Career development courses	Variable	Clinical and Translational Science Institute & University of Florida
Biostatistical support	\$2500.00	Clinical and Translational Science Institute

\$125 x 20 hours		
Dean's Support*	\$27,336.60	College of Public Health and Health Professions
Total	\$78,723.72	
Year 2 (4 Pre Docs & 6 Post Docs)		
Item	Cost	Provider
Space (DG-84) Sq FT = 195 195 x 1.25 x \$9.35	\$2,279.06	Dean of the College of Public Health and Health Professions/College of Medicine
Tuition (40% not covered) \$658.72 per credit x 32 credits x .40 for 6 Pre Docs	\$50589.70	University of Florida
Gator ID cards \$16.17 x 6	\$97.02	University of Florida
RTS Bus Pass \$35 x 12 months x 6	\$2520.00	University of Florida
UF library accounts	Variable	University of Florida
UF Software: Microsoft Office Suite (\$99x6) , SPSS (\$75x6), SAS (\$65x6), Adobe Acrobat Professional (\$150x6), EndNote (\$125x6), Reference Manager (\$220x6), McAfee VirusScan Enterprise (\$75x6)	\$4854..00	College of Public Health and Health Professions
Career development courses	Variable	Clinical and Translational Science Institute & University of Florida
Biostatistical support \$125 x 20 hours	\$2500.00	Clinical and Translational Science Institute
Dean's Support*	\$27,336.60	College of Public Health and Health Professions
Total	\$85,322.38	
Year 3 (4 Pre Docs & 6 Post Docs)		
Item	Cost	Provider
Space (DG-84) Sq FT = 195 195 x 1.25 x \$9.35	\$2,279.06	Dean of the College of Public Health and Health Professions/College of Medicine
Tuition (40% not covered) \$757.53 per credit x 32 credits x .40 for 6 Pre Docs	\$58178.15	University of Florida
Gator ID cards \$16.17 x 6	\$97.02	University of Florida
RTS Bus Pass \$35 x 12 months x 6	\$2520.00	University of Florida
UF library accounts	Variable	University of Florida
UF Software: Microsoft Office Suite (\$99x6) , SPSS (\$75x6), SAS (\$65x6), Adobe Acrobat Professional (\$150x6), EndNote (\$125x6), Reference Manager (\$220x6), McAfee VirusScan Enterprise (\$75x6)	\$4854..00	College of Public Health and Health Professions
Career development courses	Variable	Clinical and Translational Science Institute & University of Florida
Biostatistical support \$125 x 20 hours	\$2500.00	Clinical and Translational Science Institute
Dean's Support*	\$27,336.60	College of Public Health and Health Professions
Total	\$92,910.83	
Year 4 (3 Pre Docs & 6 Post Docs)		
Item	Cost	Provider
Space (DG-84) Sq FT = 195 195 x 1.25 x \$9.35	\$2,279.06	Dean of the College of Public Health and Health Professions/College of Medicine
Tuition (40% not covered) \$871.16 per credit x 32 credits x .40 for 6 Pre Docs	\$66904.87	University of Florida
Gator ID cards \$16.17 x 6	\$97.02	University of Florida
RTS Bus Pass \$35 x 12 months x 6	\$2520.00	University of Florida
UF library accounts	Variable	University of Florida
UF Software: Microsoft Office Suite (\$99x6) , SPSS (\$75x6), SAS (\$65x6), Adobe Acrobat Professional (\$150x6), EndNote (\$125x6), Reference Manager (\$220x6), McAfee VirusScan Enterprise (\$75x6)	\$4854..00	College of Public Health and Health Professions
Career development courses	Variable	Clinical and Translational Science Institute & University of Florida
Biostatistical support \$125 x 20 hours	\$2500.00	Clinical and Translational Science Institute
Dean's Support*	\$27,336.60	College of Public Health and Health Professions
Total	\$101,637.55	
Year 5 (3 Pre Docs & 6 Post Docs)		
Item	Cost	Provider
Space (DG-84) Sq FT = 195 195 x 1.25 x \$9.35	\$2,279.06	Dean of the College of Public Health and Health Professions/College of Medicine
Tuition (40% not covered)	\$76940.60	University of Florida

\$1001.83 per credit x 32 credits x .40 for 6 Pre Docs		
Gator ID cards \$16.17 x 6	\$97.02	University of Florida
RTS Bus Pass \$35 x 12 months x 6	\$2520.00	University of Florida
UF library accounts	Variable	University of Florida
UF Software: Microsoft Office Suite (\$99x6) , SPSS (\$75x6), SAS (\$65x6), Adobe Acrobat Professional (\$150x6), EndNote (\$125x6), Reference Manager (\$220x6), McAfee VirusScan Enterprise (\$75x6)	\$4854..00	College of Public Health and Health Professions
Career development courses	Variable	Clinical and Translational Science Institute & University of Florida
Biostatistical support \$125 x 20 hours	\$2500.00	Clinical and Translational Science Institute
Dean's Support*	\$27,336.60	College of Public Health and Health Professions
Total	\$111,673.28	
GRAND TOTAL	\$470.267.76	

*Equivalent of 50% of Pre Docs for Training related expenses

Total = \$136,683

Divide in 5 for per year allotments = \$27,336.60

Recruitment/Retention/Diversity

History and Achievements

(a) University of Florida: UF's large minority undergraduate and international graduate enrollment, and the gender and cultural diversity of our participating faculty, will provide a diverse environment and an important source of peer support for students. UF has been successful at recruiting minority students and is the only major public university in Florida to have fully recovered its minority enrollment following a State legislative ban on the granting of admission preference to minority students. The total minority enrollment at UF for all degree programs combined was 19% as of Fall 2008. UF ranks nationally among the top universities in minority graduates at all levels. UF ranks 3rd in professional degrees and 6th for doctoral degrees granted to African-American students as of 2006-2007 data. UF ranks 2nd in professional degrees and 8th for doctoral degrees granted to Hispanic students as of 2006-2007 data.

(b) Diversity of partner departments: Consistent with the SF-424 Instructions, as a graduate training program, we have focused primarily on under-represented minorities. In that context, over the past five years (as shown in **Tables 1 and 7a**), our partner programs have experienced a very high rate of diversity: 718 out of 5,378 applicants (13.4%) were training grant eligible (TGE) and under-represented minorities; 103 out of 918 (11.2%) were TGE and accepted; 73 out of 563 (13.0%) were TGE and enrolled. This suggests that the average rate of racial/ethnic diversity of our partner programs **is actually lower than the 10-year record of diversity for our T32 program. Said differently, we have successfully over-sampled under-represented trainees from the available population.** Specifically

(c) Previous successes of this T32: Of our 23 funded trainees since program funding start, 6 (26%) of the trainees have been members of under-represented groups (1 Native American, 1 African American, 2 Hispanic/Latino, and 2 Asian/Pacific Islander). It should also be noted that 17 (73.9%) of our trainees were women.

(b) Areas for growth and improvement: Although we have recruited about double the percentage of under-represented minorities as reside in our partner departments, **our goal is to reach a 33% enrollment rate**, and to particularly attract African American trainees into our pool. At present, only 1 of 23 trainees was African American. **The proposed plans below focus, in particular, on African American recruitment.**

Proposed plans

(a) Broad spectrum. Our general recruitment approach involves listserv and print advertisement approaches (**See Appendix D for a sample**). These are "broad spectrum", and we will substantially increase both the effort and cash investment to increase diversity of our applicant pool.

(b) Long-Standing Institutional Efforts by UF to Successfully Recruit Minority Students. The Training Program benefits from efforts of the UF Office of Graduate Minority Programs (OGMP) to recruit minorities. Specifically, each year the OGMP provides prospective and enrolled graduate students in underrepresented demographic groups with material aid and mentoring to help them successfully pursue a graduate school education. The OGMP accomplishes this mission through a number of programs, including the Campus Visitation Program, the Delores Auzenne Dissertation Award, the Florida A & M Feeder Program, the Florida Board of Education Summer Fellowship Program, the Moving in the Direction of Excellence Conference, the McKnight Doctoral Fellowship, the McNair Graduate Assistantship Program, professional development workshops, and supplemental scholarships.

The University also created the Historically Black Colleges and Universities-UF (HBCU-UF) Master's to Ph.D. Pathway Project to identify top-performing students in master's programs at participating HBCUs. This collaborative project between HBCUs and the University of Florida is designed to identify master's students who demonstrate that they have the capacity to be strong Ph.D. students as indicated by their creativity, intellectual curiosity, how they process information, and their academic performance. The primary goal of the Pathway Project is to increase the number of underrepresented minority students enrolled in Ph.D. programs and subsequently becoming Ph.D. recipients by identifying and advancing those individuals who have the capacity to do well at the Ph.D. level of graduate studies. This project is highly effective at developing and producing Ph.D. students from a pool that is not effectively tapped.

We will work with the UF Office of Graduate Minority Programs (OGMP) and the South East Alliance for Graduate Education and the Professoriate (SEAGEP) to facilitate campus visits for prospective students (a key and underappreciated component of successful recruitment) and to facilitate retention. **Appendix D provides a detailed institutional tool kit for minority recruitment and retention.**

(c) Current Departmental Efforts to Rapidly Increase and Mentor Underrepresented Minority Faculty. Along these same lines, Dr. Bill Latimer as new Chair of Marsiske's department (Clinical & Health Psychology) has defined increased minority representation of faculty and students as a Departmental core goal. As such, since his arrival, his initial hire of a tenure-track faculty increased minority representation of Departmental faculty. Additionally, Dr. Latimer facilitated or wrote three diversity supplement applications to extant R01s of CHP faculty to fund three minority post-doctoral fellows and junior faculty. In addition to the standard recruitment procedures employed by the University to attract underrepresented minorities into the University generally and to its Training Programs specifically, virtually all core faculty mentors of the Training Program will participate in efforts to recruit underrepresented minority students. For example, core faculty members attend numerous national conferences, including the College on Problems of Drug Dependence, the American Psychological Association conference, the American Public Health Association conference, the Society for Prevention Research conference, the Society for Epidemiologic Research conference, and the Society for Neuroscience conference. We anticipate that core faculty attendance at these conferences will enable the Training Program to reach several hundred minority undergraduate and graduate students with an interest in pre-doctoral and post-doctoral training in allied health and addictions many of whom will then be made aware of opportunities at UF, including the proposed training program if funded.

(d) Training grant-specific initiative #1: Collaborative Recruitment at Historically Black Colleges and Universities. As documented here, we already have relationships with seven historically-black universities who have pledged to help us identify promising candidates. Each fall, faculty will present research seminars and meet with students at these target institutions. Reciprocal visits to UF by minority faculty from target institutions, to highlight their research and meet with our students and faculty, will aid retention by allowing interaction with role models. We will also recruit students at annual meetings, targeting minorities by coordinating with society programs for minority students. We will provide travel funds for meetings and campus visits, and will especially focus on empowering minority students already in the program to help in our recruitment efforts. As discussed above, UF is a highly diverse institution, which makes both the likelihood of recruiting candidates and providing a supportive environment for them greater.

Seven distinguished African American faculty members, most of who are faculty at Historically Black Colleges and Universities have agreed to work with Drs. Marsiske and Tucker to present the "Physical, Cognitive and Mental Health in Social Context" Aging Training Program. to their students in courses and research seminars. Each faculty will be provided with a power-point slide presentation on the Training Program that they can then use when presenting the program to students in courses and other forums. The following faculty members have agreed to assist our efforts to recruit minorities into the Training Program: **Duane Jackson, Ph.D.**, Professor and Chair of Psychology at Morehouse College; **Gwendolyn Singleton, Ph.D.**, Associate Professor and Chair of Psychology at Florida A & M University; **Timothy Moore, Ph.D.**, Associate Professor and Chair of Psychology at Clark Atlanta University; **Annie Wells, Ph.D.**, Professor and Director of Clinical Training, Alabama A & M University; **Zaje Harrell, Ph.D.**, Assistant Professor, Michigan State University; **Terra Bowen-Reid, Ph.D.**, Associate Professor of Psychology at Morgan State University; **Vernessa Clark, Ph.D.**, Associate Professor and Coordinator of Psychology at Virginia State University; and **Sonia Bell, M.S.Ed.**, Assistant Professor of Psychology at Prince George's Community College. Three of these faculty members are Chairs of large departments and will be able to reach several hundred students who are undergraduate and graduate majors in their departments, as well as multiple faculty members. Should we prove successful in recruiting minority fellows into the program, our goal is to have at least 2 of the proposed 6 fellows (i.e., 33%) be from underrepresented minority groups. Each of the above faculty members have also expressed their willingness to be affiliate faculty in the Training Program and to thus also serve as additional mentors and collaborators to all fellows. **Letters from each of the faculty assisting with minority recruitment are included in this application, in the "Letters of Support" section.**

(e) Training grant-specific initiative #2: Dedicated Recruitment Team Leader (Carolyn M. Tucker, Ph.D). As documented earlier in this proposal, **Carolyn Tucker** has agreed to join the Graduate Recruitment and Training Committee, with specific goals to: (i) advise and consult on additional community and HBCU partners who may assist in diverse recruitment; (ii) to serve as a liaison to prospective trainees, (iii) to leverage her success as the **single-most successful faculty member at UF in recruiting diverse scholars** (as discussed above). Dr. Tucker will also engage in active ongoing analysis and critique of recruitment success, and she will schedule tri-annual “check-ins” with minority trainees to evaluate whether there are any remediable threats to retention.

Instruction in the Responsible Conduct of Research

Existing strategy

All students and faculty participants in this training program are required to have completed several written and online requirements. These include, organized per PHS guidelines:

Format: Traditionally, three formats were used as part of our T32:

Online:

1. All trainees must read (a) **Belmont Report**, which describes and explains the ethical principles that should be followed by such investigators: respect for persons, beneficence and justice. This is maintained online at <http://ohsr.od.nih.gov/guidelines/belmont.html> ; (b) UF's **Multiple Project Assurance**; (c) **Code of Federal Regulations**: All trainees must read, and be prepared to discuss, 45 CFR 46. This document is the Federal regulation that describes the authority and responsibility of Institutional Review Boards (IRBs) in protecting human subjects. This is maintained online at <http://ohsr.od.nih.gov/guidelines/45cfr46.html>. These must be read prior to commencing any research activities.
2. **NIH Computer Based Training**: The National Institutes of Health (NIH) provide an on-line Computer Based Training (CBT) module. All investigators and all key personnel at UF must complete this training and obtain a certificate of completion. Investigators should maintain a file with copies of all relevant training. The web address is: <http://phrp.nihtraining.com/users/login.php>. This must be completed at least every two years.
3. **HIPAA Training**: UF requires all researchers to conduct an annual online training. Students must pass a knowledge test with at least 70% accuracy to receive continued certification to participate in research.
4. **NIH Financial Conflict of Interest Training**. UF requires all researchers to conduct an online training regarding NIH conflict of interest rules. Students must pass a knowledge test with at least 70% accuracy to receive continued certification to participate in research. This must be retaken every four years.

Workshop/seminar:

1. As noted in the body of the proposal, a monthly professional development roundtable occurs for Pepper Center scholars and T32 trainees. Human subjects protection topics are discussed for at least three one-hour sessions per year; these often take the form of case discussions

Mentor guidance

Informal and formal methods are necessary for effective training in the responsible conduct of research. The example set by the trainee's mentor is the one most emulated by students and post-docs when they start their own independent careers. Hence, to supplement the formal course work, there will be frequent discussions between the mentor and trainee dealing with specific issues such as conflict of interest, data recording and retention, authorship, professional standards, and codes of conduct.

Subject Matter: The online modules, formal courses (see below), and roundtables specifically address the following topics: conflict of interest , policies and regulations regarding human subjects, mentor/mentee responsibilities and relationships, collaborative research including collaborations with industry, peer review, data acquisition and laboratory tools; management, sharing and ownership, research misconduct and policies for handling misconduct, responsible authorship and publication

Faculty Participation: Faculty are specifically involved as instructors/leaders of the class and roundtable/workshops. Faculty are also involved as mentors/mentoring team members during the more ad-hoc one-on-one mentoring components of the program.

Duration of Instruction: Instruction is ongoing. Online coursework consists of approximately 2 hours annually, with an additional one hour bi-annually and every four years. The mentoring meetings require 3 contact hours annually (plus much more, undocumented, in weekly sessions with the primary mentor).

Frequency of Instruction: Instruction is ongoing. Some human subjects content should be reviewed monthly (in roundtables and/or mentoring meetings), with more intensive online instruction occurring annually. The human subjects course, when taken, is an intensive one-semester course.

Changes in formal instruction planned for this cycle.

In line with the NIH-wide goal to increase knowledge and sensitivity to responsible conduct of research, we will now begin to require, during the first year of training, a formal course. This is described below.

Additional plans for instruction in responsible conduct

Along with the informal training, a graduate course entitled “Responsible Conduct of Biomedical Research” (GMS 7003) will be required. This course is offered each spring semester and all first year pre-doctoral and first year post-doctoral trainees take the course. The course provides a practical overview of the rules, regulations, and professional practices that define the responsible conduct of research, and emphasizes case-based discussions in a team setting. Coverage is not exhaustive and leaves room for continued reading and discussion with the student's mentor, in the laboratory/classroom/professional meetings, etc.

1. Course Format: The “Responsible Conduct of Biomedical Research” course is directed by Wayne T. McCormack, PhD, director for the UF Clinical & Translational Sciences predoctoral training program and former Associate Dean for Graduate Education (current syllabus available online at <http://oge.med.ufl.edu/RCR/>). The course was created in 2004; rather than lecture-based, the course has evolved into a format of 90% of instructional time devoted to team-based, active learning activities.

The course begins with a pre-test and concludes with a post-test of ethical decision-making skills, the results of which are coded to maintain student anonymity to the course director, and have no impact on grading. This test is being used both as a research tool in an IRB-approved research study to assess the effectiveness of this RCR training method, and as a learning tool in order to: (1) increase student awareness of the complexity of situations that arise in biomedical research; (2) provide students with an opportunity to apply what they have learned in the course; and (3) provide students with a confidential self-assessment of their decision-making skills.

The first instructional session is a lecture delivered by the course director, which introduces learners to RCR training, research misconduct, the roles of scientists as responsible members of society, and the environmental and societal impacts of scientific research. The lecture also introduces learners to team-based learning™ (TBL, <http://www.tblcollaborative.org/>), which is used in all subsequent class sessions. TBL is a special form of student-centered learning that uses individual work, group work and immediate feedback to motivate students to hold each other accountable for coming to class prepared, actively engaging in discussion, and focusing on application of course concepts. TBL combines the interactivity of small-group collaborative learning with the efficiency of large group teaching, and gives learners experience in working with the uncertainty of complex problems, such as ethical issues encountered in the research environment. The TBL approach also provides advantages of teaching team skills to learners from different ethnic and cultural backgrounds, and is adaptable to learners at different levels, including undergraduate, graduate, postdoctoral, and faculty.

The three phases of TBL are preparation, readiness assurance, and application. In the preparation phase learners must assimilate knowledge outside of class, before each TBL session. This course thus requires self-learning, which includes assigned readings from the free on-line textbook "ORI Introduction to the Responsible Conduct of Research" by Nicholas H. Steneck, and videotaped lectures or voice-over PowerPoint presentations posted for students on-line via our course management system. Whenever possible, the faculty members who will be facilitating the TBL sessions have also prepared these lectures. The first in-class activity of each TBL session is the readiness assurance test (RAT) taken by students first individually to hold them accountable for learning, and then within teams, to promote cooperative learning and team-building. RATs consist of ten multiple-choice questions about rules, regulations, and ethical principles relevant to each module, based on the reading assignments and lecture material. Answers are recorded using Scantron forms for the individual RAT and using Immediate Feedback Assessment Technique (IF-AT) “scratch-off” cards (www.epsteineducation.com/home/about/) for the team RAT. The most important part of TBL is the group application exercises, designed to promote deep thinking and content-focused discussion on ethical dilemmas. Key TBL principles followed in the development of these case-based discussions include the use of “4 S’s”: significant problems based on real-life scenarios; having all groups work on the same problems; asking teams to make specific choices in response to very specific questions; and simultaneous reporting from all teams during the class discussion. Within each TBL module students cycle through engaging with course content via

self-learning, by working within their team, and working across teams (i.e., whole class), allowing them to learn from each other and develop confidence in their ability to discuss complex issues and work in groups.

2. Course Subject Matter: All topics recommended by NIH notice NOT-OD-10-019 are included in the course.

NIH Topic	Text Chapter	Course Content
i. the scientist as a responsible member of society, contemporary ethical issues in biomedical research, environmental and societal impacts of scientific research	1	Introduction to RCR, Ethical Decision-Making, & TBL (Lecture)
g. research misconduct and policies for handling misconduct	2	Research Misconduct (TBL)
b. policies regarding human subjects, live vertebrate animal subjects in research, and safe laboratory practices	3	Protection of Human Subjects (TBL)
	4	Welfare of Laboratory Animals (TBL)
f. data acquisition and laboratory tools; management, sharing and ownership	5	Data Management Practices (TBL)
a. conflict of interest – personal, professional, and financial	6	Conflict of Interest (TBL)
c. mentor/mentee responsibilities and relationships	7	Mentor & Trainee Responsibilities (TBL)
d. collaborative research including collaborations with industry	8	Collaborative Research (TBL)
h. responsible authorship and publication	9	Authorship & Publication (TBL)
e. peer review	10	Peer Review (TBL)

3. Faculty Participation: Training faculty and sponsors/mentors are highly encouraged to contribute both to formal and informal instruction in responsible conduct of research. Informal instruction occurs in the course of laboratory interactions and in other informal situations throughout the year. The following faculty members are currently involved in teaching the formal RCR course.

Wayne T. McCormack, PhD	Director, Clinical & Translational Sciences Program; Former Associate Dean for Graduate Education; Associate Professor, Pathology, Immunology & Lab. Medicine
William L. Allen, JD, MDiv	Director, Program in Bioethics, Law and Medical Professionalism; Associate Professor, Community Health & Family Medicine
William Buhi, PhD	Chair, UF Institutional Animal Care & Use Committee (IACUC); Professor Emeritus, Obstetrics and Gynecology
Ammon B. Peck, PhD	Former Co-Chair, UF Institutional Review Board (IRB); Professor, Pathology, Immunology & Laboratory Medicine
Colin Sumners, PhD	Former Associate Dean for Graduate Education; Professor, Physiology & Functional Genomics
Bruce Goldberger, PhD	Editor-in-Chief, Journal of Analytical Toxicology; Professor, Pathology, Immunology & Laboratory Medicine

4. Duration of Instruction: The “Responsible Conduct of Biomedical Research” course meets weekly for twelve weeks as a semester-long course, and entails 2 hours of pre- and post-testing plus 2 contact hours of lecture and 18 contact hours of team-based learning activities.

5. Frequency of Instruction: The “Responsible Conduct of Biomedical Research” course must be taken during the first year of T32 training, if they have not already done so. In order to meet the frequency of training requirement of no less than once every four years, a “refresher” course is under development for trainees who do not complete doctoral studies within four years of taking this course.

Progress Report

This progress report covers our first two periods of funding, from 5/2003-4/2013.

Accomplishments

In our first 10 years, we recruited a total 26 trainees. Our T32 predoctoral program pre-dated the arrival of Marco Pahor and the launch of the UF Pepper Center (OAIC), but the program was useful for laying the groundwork for many of the practices that now undergird the OAIC. We began the weekly colloquium five years before the Pepper Center, and used it to bring together a community of scholars that later became faculty partners of the OAIC. Now, as the OAIC and allied research resources have come to the University of Florida, we have ended with a far more substantial research infrastructure than we started with.

To that end, one expects that we will continue to see a ramping up in each cycle of the quality, productivity, and trajectory of trainees. The T32 has been one part of institutional ascension to higher volumes and quality of aging research. As our departmental tables show (especially **Tables 5-9**), we have huge numbers of potentially qualified trainees with strong credentials—all students are funded in various ways, but there are far more qualified trainees than we have slots.

One problem with the departmental tables is that they do not clearly allow us to explicate the quality and productivity of our trainees. Thus, we have added additional information in this progress report to provide a lens on specific trainee outcomes.

Selection

With regard to GRE distribution, we analyzed the GRE (Verbal, Quantitative, using “old” GRE scale of 300-800) and GPA (undergraduate, graduate—where applicable, and at University of Florida prior to acceptance into the T32 program) of students who applied to the T32, separated by acceptance status. As befits the fact that all students had already been admitted to a UF graduate program and were in good standing, and given that numerical credentials were not the primary criterion by which students were selected, there are no significant differences between accepted and not accepted students. What the table below also shows, however, is that the students who applied to the T32 program had generally high indicators of academic aptitude, and were at or above the median of their departments. For admitted students, undergraduate GPA averaged 3.67, and graduate GPAs were in excess of 3.95. Average GRE scores were 619 (Verbal) and 670 (Quantitative).

	Undergrad. GPA		Graduate GPA		GPA at UF prior to application		GRE Verbal		GRE Quantitative	
	<i>Admit</i>	<i>Not admit</i>	<i>Admit</i>	<i>Not admit</i>	<i>Admit</i>	<i>Not admit</i>	<i>Admit</i>	<i>Not admit</i>	<i>Admit</i>	<i>Not admit</i>
Mean	3.67	3.65	3.96	3.93	3.95	3.82	619.38	632.22	670.00	687.78
StdD	0.36	0.44	0.05	0.05	0.07	0.15	41.87	50.94	88.17	59.54
Min	2.92	2.61	3.84	3.91	3.76	3.51	510.00	550.00	490.00	580.00
Max	4.00	4.00	4.00	4.00	4.00	4.00	680.00	710.00	750.00	740.00

We consider our record of training to be strong. Of the 26 trainees trained to date, **six** already occupy **faculty** positions in their disciplines of training, and five continue to do research in aging; **eleven** others are currently in **postdoctoral or research** associate positions, which suggests that they remain on research career trajectories. **Seven current trainees** are still in training. Only one candidate has left academia, and reports (in our annual debriefing) that this is for personal reasons, and not related to the training received.

We find it noteworthy that the program has also evolved to fit the strengths of the institution. As our OAIC has focused the institution on independence and disability from a biopsychosocial perspective (ICF), our multidisciplinary mix of nurses, rehabilitation scientists, audiologists and communication scientists, exercise physiologists, psychologists and others have come to represent the ideal mix of disciplines to prepare future generations of scholars to attach the multi-dimensional problem of disability pathways and loss of independence in old age.

Specific trainee placement is shown in the table that follows. In addition, “Current Trainees” are indicated as “in training” in the table that follows.

Summary of Trainee durations of appointment, research topics, and current placements (table that follows is new in the resubmission)

Trainee	Years	Preceptor	Topic	Status	Current Position	Currently Conducting Aging Research
Cook Sarah	01-03	Marsiske	The diagnostic utility of subjective memory questionnaires in normal and pathological aging	Graduated 2008	Assistant Professor, Duke University	Yes
Semegon Angi	01	Diehl ^a	Autobiographical memory, self-concept, older adults, self-defining memory	Graduated 2006	Instructor, Santa Fe College;	No
Dotson Vonetta	02	Perlstein	Cumulative disadvantage in cognitive control due to depression and aging: a double jeopardy hypothesis	Graduated 2006	Assistant Professor, Dept. Clinical and Health Psychology, University of Florida	Yes
Baron Jacqueline	02-05	Bluck	Functions of autobiographical memory across the lifespan	Graduated 2010	Research Scientist, Institute for Child Health Policy, University of Florida	Yes ^c
Dark-Freudeman, Alissa	03-05	West	Memory-related possible selves: exploring age-related differences	Graduated 2010	Assistant Professor, Psychology, UNC Wilmington;	Yes
Floetke Elliot Amanda	03	Horgas	Assessing and treating chronic pain in community-dwelling older adults with dementia: a single-subject approach	Graduated 2006	Assistant Professor, Nursing, University of South Florida;	Yes
Dzierzewski,	04-06	McCrae	Cognitive Aging,	Graduated	Advanced	Yes

Trainee	Years	Preceptor	Topic	Status	Current Position	Currently Conducting Aging Research
Joseph			Sleep and Cognition in Older Adults, Short-term Variability in Cognitive Performance of Older Adults	2011	postdoctoral fellowship, Greater Los Angeles VA System GRECC;	
Aennle Kristina	04-05	Foster	Molecular changes in the aging hippocampus	Graduated 2009	Research Chemist, Department of Veterans Affairs Medical Center Geriatric Research, Education and Clinical Center	Basic science (aging-relevant)
Stigge-Kaufman David;	05	Perlstein	Interference effects of anxiety and affective processing on working memory: behavioral and electrophysiological accounts	Graduated 2009	Assistant Professor, St. Louis University	Yes
Witte Megan	05	Mann	External prompting devices for people with dementia	Graduated 2008	Private practice	No
Sisco Shannon	06-07	Marsiske	Neighborhood influences on cognitive level and training gains in the ACTIVE study	Graduated 2011	Psychologist; North Florida/South Georgia Veterans Administration	Yes
Springer Utaka	06	Bowers	Essential Tremor in older Men: Paradoxical Visuospatial Cognition	Graduated 2009	University of California at Berkeley Postdoctoral Fellow	Yes
Hastings Erin	07-08	West	Beliefs and Learning in adulthood	Graduated 2009	Research scientist, Department of Neurology, University of Florida	Yes
Marcinkiewicz, Catherine;	07	Foster / Devine	The role of the organic cation transporter 3 (OCT3) in stress-related	Graduated 2010	Postdoctoral fellow, University of North Carolina at	Basic science (aging relevant)

Trainee	Years	Preceptor	Topic	Status	Current Position	Currently Conducting Aging Research
			psychopathology		Chapel Hill	
Mitchell Sandra	07	Price	White Matter and Cognition in Parkinson's Disease	Graduated 2011	Postdoctoral fellow, University of New Mexico / Albuquerque VAMC	Yes
Zahodne, Laura	07-08	Bowers	Components of Depression in Parkinson Disease: Relation to Psychophysiology and Affective Chronometry	Graduated 2011	Postdoctoral Fellow, Columbia University	Yes
Yam, Anna	08-10	Marsiske	The Effects of Spatially-Demanding Videogame training on Mental Rotation Performance and Confidence in Older Adults	In training	Clinical intern, Palo Alto VA	Yes
Higgins Torrance	08-10	Manini	Task Specific Exercise For the Pre-Clinically Disabled	In training	Doctoral candidate, UF, Applied Physiology & Kinesiology	Yes
Zlatar Zvinka	08	Crosson ^a	Exercise, Cognition, and Brain Functions in Older Persons	Graduated 2011	Postdoctoral fellow, University of California San Diego;	Yes
Akhtar, Wajiha	09	Cook / Manini	Age-related Cognitive Effects on HIV-positive Older Adults	In training	Doctoral candidate, UF, Epidemiology	Yes
Cohen Matthew	09	Price	Exo- and Endo-Evoked Movement in Advanced Age and Parkinson's Disease	2013	Postdoctoral fellow, Johns Hopkins University	Yes
Kay Daniel	09	Bowers	Sleep, Aging, and Parkinson's Disease: Impact on Cognition and Mood	2013	Postdoctoral fellow, University of Pittsburgh	Yes
Thomas Kelsey	09-10	Marsiske	Prompting as a Method for Improving Everyday Cognition in MCI and Unimpaired Older	In training	Doctoral candidate, UF, Clinical and Health Psychology	Yes

Trainee	Years	Preceptor	Topic	Status	Current Position	Currently Conducting Aging Research
			Adults			
Mangal Paul	10	Bowers	Arousal and induced memory enhancement in aging and Parkinsons disease	In training	Doctoral candidate, UF, Clinical and Health Psychology	Yes
Arthur Paul	10	Mann	Burden in caregivers of veterans	In training	Doctoral candidate, UF, Rehabilitation Sciences	Yes
Vatthauer Karlyn	10	McCrae	Relationship of sleep and pain variability with cognition in older adults with and without insomnia	In training	Doctoral candidate, UF, Clinical and Health Psychology	Yes

Table note: ^a No longer at University of Florida; ^b Research position is in a life-span developmental institute that encompasses health policy from childhood through adulthood;

Progress of current trainees

Three of our trainees were appointed just before the submission of this application, and have had only two months of training at the time of submission. For all others, trainee publications that emerged while in training, or that followed post-graduation and were related to training are shown.

Publications

While Data table 6 provides a partial list of publications directly stemming from dissertation/mentor, this includes all trainees mentored by our faculty, but the majority are not trainees on this T32. To make it easier to see the specific progress of our trainees, the table that follows is restricted to only these students.

Trainee publications and funding (table that follows is new in the resubmission)

Trainee	Aging-related publications during and since training grant	Funding received
Cook Sarah	Cook, S.E. , Sisco, S. M. & Marsiske, M. Dual-task effects of simulated lane navigation and story recall in older adults with and without memory impairment. (In press.) <i>Aging, Neuropsychology, and Cognition</i>. Cook, S.E., Marsiske, M., Thomas, K. R., Unverzagt, F.W., Wadley, V.G., Langbaum, J.B.S. & Crowe, M. (2013). Algorithmic identification of Mild Cognitive Impairment in ACTIVE: Classification and stability. <i>Journal of the International Neuropsychological Society</i>, 19, 63-72. Parisi, J.M., Gross, A.L., Rebok, G.W., Saczynski, J.S., Crowe, M., Cook, S.E., Langbaum, J., Satori,	American Association for Retired Persons, Primary Investigator, August 2005-May 2007 AARP Scholars Program, \$10K Dissertation research support

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Training related expenses

Training related expenses are used on a case-by-case basis. After health insurance is paid for all trainees (in excess of \$1,000), expenses are used to address specific needs. Examples of disbursements include: (a) Replacement of two non-functioning computers, to permit two trainees to conduct complex multi-level and structural equation analyses; (b) placement of newspaper advertisements and mailing of direct-mail solicitations to recruit 100 older men for a study of cognitive change in aging and Parkinson's disease; (c) supplementation of the low amount budgeted for travel (previously \$750), to permit fuller coverage of travel

costs, or second conference or educational workshop trips; (d) purchase of books for trainees that were not available at the University of Florida library; (e) payment of travel costs for a research consultant/speaker closely linked to the research of a trainee (to facilitate both networking and consultation). In each case, the funds are disbursed only insofar as they directly augment the research of a trainee.

Trajectory.

Table 11 shows that no training slots have gone unfilled or unutilized. Because of high demand and high levels of qualification for these slots, we have consistently made use of all available training slots.

As Table 12A shows, and as summarized above, of the 26 trainees trained to date, six already occupy faculty positions in their disciplines of training, and five continue to do research in aging; eleven others are currently in postdoctoral or research associate positions, which suggests that they remain on research career trajectories. Seven current trainees are still in training. Only one candidate has left academia, and reports (in our annual debriefing) that this is for personal reasons, and not related to the training received.

Of these 26 trainees, they worked with 15 different mentors representing seven different disciplines (Rehabilitation Sciences, Applied Physiology and Kinesiology, Neurosciences, Clinical and Health Psychology, Psychology, Nursing, and Epidemiology/Health Services Research)

Diversity

Of the 26 trainees funded to date, 1 has been Native American, 2 have been Hispanic/Latino, 1 has been African American, and 3 have represented Asian/Pacific Islanders. This means 30% of trainees come from URM groups, a rate which about double that of the constituent partner programs. Despite that, in the current proposal we have targeted growth in minority representation (we are striving for 33%, or two trainees a year), and we have put in substantial resources (including over \$138,000 from the Dean of Public Health and Health Professions, appointment of a Team Leader of oversee diversity, and developed a “pipeline” of partners from seven HBCUs. We expect to do even better if renewed.

Instruction and evaluation

The proposal documents the evaluation process we have put in place. If renewed, we will add an external advisory board (representing physical function/mobility, cognition, and health care – our three training emphases) to provide additional oversight and guidance. To date, all trainees are required to take a Gerontology Certificate (value-added coursework beyond their majors), at least 11 credits of statistics methodology, and to attend weekly colloquia and monthly professional development roundtables.

We have developed an online “monitor”. Above and beyond regular mentoring meetings, students are asked to enter a record colloquiums attended in real time, so we have a record of participation. The Gerontology Certificate program maintains records of completion for all trainees.

Human Subjects

Per PHS directives, we note that trainee participation in research involving human subjects is solely as part of other research projects that have received or will receive IRB review and approval, and no portion of the Training grant Award will be used to support this research. As requested, a list of trainee research projects is provided here. This list is for current trainees only. Annual Progress Reports to NIH have included the IRB information for all trainees' research.

All students' projects were reviewed under the University of Florida's DHHS General Assurance for the Use of Human Subjects: FWA00005790.

Trainee #1's work has been conducted with the context of 'Sleep and Pain Interventions in Fibromyalgia: Hyperalgesia and Central Sensitization (NIH/NIAMS) (R01 AR055160, Christina S. McCrae, Principal Investigator). The University of IRB Protocol Number is #627-2007. The study is approved through 2/20/2014.

Trainee #2's research has been conducted within the context of 3 studies. His master's research comes from the study "Disorders of Emotion Processing: Emotional Memory in Aging and Parkinson's Disease." The University of Florida IRB Protocol Number for this study (not an NIH-funded study; Dawn Bowers, Principal Investigator) is 558-2002 and is approved through 12/28/2013. The University of Florida IRB Protocol number for study number 2, "Emotion Regulation, Executive Function, and Parkinson's Disease" (1R21N5079767-01, Dawn Bowers, Principal Investigator) is 199-2012 and is approved through 5/1/2014. The University of Florida IRB Protocol Number for study 3, "Village Interactive Training and Learning Study (VITAL)" (not an NIH-funded study; Dawn Bowers, Michael Marsiske, Principal Investigators) is 179-2010 and is approved through 03/20/2014.

Trainee #3's work has been conducted within the context of the study "Nonpharmacologic Management of Challenging Behaviors of Veteran's With Dementia (TAP-VA) (William C. Mann, Principal Investigator). The University of Florida IRB Protocol Number is 454-2011. The study is approved through 9/20/2013.

Trainee #4's work has been conducted within the context of two studies, both elements of her dissertation. The University of Florida IRB Protocol Number for study 1, "Task Specific Exercise for the Pre-Clinically Disabled" (5R21AG031974-02, Todd Manini, Principal Investigator), is 410-2009 and is approved through 8/15/2013. The University of Florida IRB Protocol Number for study 2, "Cognitive, affective, and kinematic signs of disability" (not an NIH-funded study; mentor: Dr. Todd Manini) is 383-2010 and is approved through 06/12/2013. A continuing review for this study was approved on 5/23/2013, although a new expiration date has not yet been assigned.

Trainee #5's work has been conducted within the context of two studies. The University of Florida IRB Protocol Number for study 1, "ACTIVE Phase III: UF/WSU Field Site" (U01AG014276, Michael Marsiske, Principal investigator) is 204-2004. The study is approved through 03/30/2014. The University of Florida IRB Protocol Number for study 2, "Village Interactive Training and Learning Study (VITAL)" (not an NIH-funded study; Dawn Bowers, Michael Marsiske, Principal Investigators) is 179-2010 and is approved through 03/20/2014.

Trainee #6's research has been conducted within the context of two studies. Her dissertation comes from the study "Action Videogames to improve everyday cognitive function in older adults" (RWJF 64441, Patricia Belchior, Michael Marsiske, Principal investigators). The University of Florida IRB Protocol Number is 207-U-1109. On December 1, 2011, the study was classified as permanently exempt from further IRB review because "(i) the research is permanently closed to the enrollment of new subjects; (ii) all subjects have completed all research-related interventions; and (iii) the research remains active only to the long-term follow-up of subjects; or (c) where the remaining research activities are limited to data analysis." She also publishes from the University of Florida IRB Protocol Number for study 1, "ACTIVE Phase III: UF/WSU Field Site" (U01AG014276, Michael Marsiske, Principal investigator) is 204-2004. The study is approved through March 30, 2014.

Not applicable

Not applicable

Not applicable

Not applicable

Leadership Group

(Graduate Recruitment and Training Committee)

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Leeuwenburgh, Christiaan	POSITION TITLE Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) cleeuwen			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
University of Florida, Gainesville	BS	1986-1988	Applied Physiology
University of Florida, Gainesville	MS	1988-1990	Applied Physiology
University of Illinois, Urbana-Champaign	PhD	1990-1995	Biochemistry and Aging
University of Wisconsin, Madison	Pre-Fellow*	1993-1995	Biochemistry and Aging
Washington Univ. School of Medicine, St Louis	Post-Fellow	1995-1998	Biochemistry and Aging Geriatrics & Gerontology

A. Personal Statement

For this T32, I will serve as Team Leader for Didactics, leveraging my similar role for the UF Pepper Center. As described in the proposal, I will be a member of the leadership team, and I will oversee specifically the colloquium, workshops, and other educational opportunities for trainees.

During the last 6 years, I have served as a leader of the Research Career Development Core (RCDC) of The Claude D. Pepper Older American Independence Center (OAIC) grant (P30 AG028740-01). I have guided UFOAIC scholars and ensured that they have received necessary scientific training and career development mentoring. I have actively participated in both leading the administrative duties and research mentoring activities. Throughout this time I have actively worked with numerous scholars on developing their research program. Many of the current scholars or affiliated scholars have obtained additional independent funding. My mentorship actively integrates with key partners for training of our future researchers: the UF predoctoral T-32 in the neurobiology of aging (T32 AG000196-16 P. Scarpace, PI, "Training in Neurobiology"), and the T32 HD043730 NIH (Krista Vandenborne, "Training in Rehabilitation and Neuromuscular Plasticity"). Finally, the University was recently awarded a UF NIH Clinical and Translational Science Institute (CTSI, PI Nelson, M Limacher, Mentoring and Academic Core Director) in which I am actively participating. In this program, I am also a primary mentor of physician and PhD scientists. As a Translational scientist, my work includes, bridging between basic and clinical sciences with a main focus on biological mechanisms of aging and disease and testing translational interventions. Thus, my research and research career development activities include ongoing partnerships with key mentors and Pepper Center Core leaders. As a result of these experiences, I am aware of the importance of frequent communication between mentors and mentees and among members of various mentoring groups here at UF. Recently I have started a Roundtable for the T32, OAIC and CTSI scholars to present current topics of interest, to discuss potential obstacles in their training and to foster collaborations among the scholars.

B. Positions and Honors

Positions and Employment

1995–1998	Washington University School of Medicine, St. Louis, Department of Internal Medicine, Divisions of Geriatrics and Gerontology, and Atherosclerosis, Nutrition and Lipid Research Postdoctoral Fellow in Internal Medicine and Geriatrics and Gerontology; Research Associate in Medicine; Adjunct Instructor; Mentors: John O. Holloszy, MD and Jay W. Heinecke, MD
1998–	Faculty Associate of the Institute on Aging and Center for Gerontological Studies
1998–2002	Assistant Professor and Director of the Biochemistry of Aging Laboratory, University of Florida

2002–2005 Associate Professor and Director of the Biochemistry of Aging Laboratory, University of Florida
 2005–2007 Associate Professor, College of Medicine, Department of Aging and Geriatric Research
 2006– Chief, Division of Biology of Aging, Department of Aging and Geriatrics
 2005– Director, Genomics and Biomarkers Core of the University of Florida Institute on Aging
 2005 Joint and Affiliate Faculty, Departments of Anatomy and Cell Biology, Biochemistry and Molecular Biology
 2007– Professor, College of Medicine, Department of Aging and Geriatrics, Division of Biology of Aging

Other Experience and Professional Memberships

2003– Member, American Aging Association
 2003– Member, Gerontological Society of America
 1997– The American Physiological Society
 1995-2008 Society for Free Radical Biology and Medicine
 1995-2008 International Society for Free Radical Research
 2008– Editor, Experimental Gerontology
 2004-2011 NIH Peer Review Committees; Special Emphasis Panels and PO1 reviews.

Honors

2011-2013 University of Florida Research Foundation Professor
 2010 Exemplary Teacher Award, College of Medicine
 2004 Nathan W. Shock Lecture Award Winner, National Institute on Aging
 (Nathan W. Shock was a former scientific director of the NIA and an NIH Scientist Emeritus)
 2004–2005 University of Florida Research Foundation, Professor Award
 2000-2002 American Heart Association, Young Investigator Award, FL
 1999–2000 Merck Geriatric Cardiology Research Award, Society of Geriatric Cardiology
 1997–1998 National Research Service Award, NRSA-NIH, National Institute of Aging
 1996 Young Investigator Award, Oxygen Society, Intern. Soc. Free Rad. Res., Miami, FL
 1993–1995 American Heart Association, Pre-doctoral Fellowship, Illinois Affiliate

C. Selected Peer-reviewed Publications (Selected from 155 peer-reviewed publications)

Most relevant to the current application (1-15)

1. Giovannini, S., Marzetti, E., Borst, S.E., and Leeuwenburgh, C. 2008. Modulation of GH/IGF-1 axis: potential strategies to counteract sarcopenia in older adults. *Mech Ageing Dev* 129:593-601.
2. Hiona, A., Sanz, A., Kujoth, G.C., Pamplona, R., Seo, A.Y., Hofer, T., Someya, S., Miyakawa, T., Nakayama, C., Samhan-Arias, A.K., et al. 2010. Mitochondrial DNA mutations induce mitochondrial dysfunction, apoptosis and sarcopenia in skeletal muscle of mitochondrial DNA mutator mice. *PLoS One* 5:e11468.
3. Someya, S., Xu, J., Kondo, K., Ding, D., Salvi, R.J., Yamasoba, T., Rabinovitch, P.S., Weindruch, R., Leeuwenburgh, C., Tanokura, M., et al. 2009. Age-related hearing loss in C57BL/6J mice is mediated by Bak-dependent mitochondrial apoptosis. *Proc Natl Acad Sci U S A* 106:19432-19437.
4. Leeuwenburgh, C., Hardy, M.M., Hazen, S.L., Wagner, P., Oh-ishi, S., Steinbrecher, U.P., and Heinecke, J.W. 1997. Reactive nitrogen intermediates promote low density lipoprotein oxidation in human atherosclerotic intima. *J Biol Chem* 272:1433-1436.
5. Leeuwenburgh, C., Rasmussen, J.E., Hsu, F.F., Mueller, D.M., Pennathur, S., and Heinecke, J.W. 1997. Mass spectrometric quantification of markers for protein oxidation by tyrosyl radical, copper, and hydroxyl radical in low density lipoprotein isolated from human atherosclerotic plaques. *J Biol Chem* 272:3520-3526.

Additional publications of importance to the field

6. Giovannini, S., Onder, G., Leeuwenburgh, C., Carter, C., Marzetti, E., Russo, A., Capoluongo, E., Pahor, M., Bernabei, R., and Landi, F. 2010. Myeloperoxidase levels and mortality in frail community-living elderly individuals. *J Gerontol A Biol Sci Med Sci* 65:369-376.
7. Xu, J., Seo, A.Y., Vorobyeva, D.A., Carter, C.S., Anton, S.D., Lezza, A.M., and Leeuwenburgh, C. 2010. Beneficial effects of a Q-ter based nutritional mixture on functional performance, mitochondrial function, and oxidative stress in rats. *PLoS One* 5:e10572.
8. Marzetti, E., Carter, C.S., Wohlgemuth, S.E., Lees, H.A., Giovannini, S., Anderson, B., Quinn, L.S., and Leeuwenburgh, C. 2009. Changes in IL-15 expression and death-receptor apoptotic signaling in rat gastrocnemius muscle with aging and life-long calorie restriction. *Mech Ageing Dev* 130:272-280.
9. Miller, R.A., Harrison, D.E., Astle, C.M., Floyd, R.A., Flurkey, K., Hensley, K.L., Javors, M.A., Leeuwenburgh, C., Nelson, J.F., Ongini, E., et al. 2007. An Aging Interventions Testing Program: study design and interim report. *Aging Cell* 6:565-575.
10. Seo, A.Y., Xu, J., Servais, S., Hofer, T., Marzetti, E., Wohlgemuth, S.E., Knutson, M.D., Chung, H.Y., and Leeuwenburgh, C. 2008. Mitochondrial iron accumulation with age and functional consequences. *Aging Cell* 7:706-716.
11. Dirks, A.J., and Leeuwenburgh, C. 2006. Tumor necrosis factor alpha signaling in skeletal muscle: effects of age and caloric restriction. *J Nutr Biochem* 17:501-508.
12. Kujoth, G.C., Hiona, A., Pugh, T.D., Someya, S., Panzer, K., Wohlgemuth, S.E., Hofer, T., Seo, A.Y., Sullivan, R., Jobling, W.A., et al. 2005. Mitochondrial DNA mutations, oxidative stress, and apoptosis in mammalian aging. *Science* 309:481-484.
13. Dirks, A.J., and Leeuwenburgh, C. 2004. Aging and lifelong calorie restriction result in adaptations of skeletal muscle apoptosis repressor, apoptosis-inducing factor, X-linked inhibitor of apoptosis, caspase-3, and caspase-12. *Free Radic Biol Med* 36:27-39.
14. Knutson, M.D., and Leeuwenburgh, C. 2008. Resveratrol and novel potent activators of SIRT1: effects on aging and age-related diseases. *Nutr Rev* 66:591-596.
15. Marzetti, E., Hwang, J.C., Lees, H.A., Wohlgemuth, S.E., Dupont-Versteegden, E.E., Carter, C.S., Bernabei, R., and Leeuwenburgh, C. 2009. Mitochondrial death effectors: relevance to sarcopenia and disuse muscle atrophy. *Biochim Biophys Acta* 1800:235-244.

D. Research Support

Ongoing Research Support

NIH (Co-PIs; Kim-Leeuwenburgh NIDDK) 6/1/2012-5/31/2017

Mitophagy: A novel target to improve liver function after ischemia/reperfusion injury

The goal is to develop therapeutic strategies to ameliorate the effects of ischemia/reperfusion injury in liver following resection and transplantation surgeries. This will ultimately improve liver function and expedite recovery periods.

U01-AG022376 9/1/2009-8/31/2014

NIH/NIA (Pahor)

Physical Exercise to Prevent Disability – LIFE Study

The primary aim is to assess the long-term effects of the proposed interventions on the primary outcome of major mobility disability as operationalized by the inability to walk 400m. Biomarkers and Metabolism Core will support the blood draw and future repository.

1 P30 AG028740-01(Pahor) 4/1/2012-3/31/2017 Co-I

NIH/NIA

Claude D. Pepper Older Americans Independence Center (OAIC)

The major goals of this program are to assess the mechanisms leading to sarcopenia and functional decline, and to develop and test interventions for the treatment and prevention of physical disability in older adults.

Metabolism and Biomarkers Core: PI

Research Career Dev. Core: PI

Research Development Project #1: PI

NIH NIAMS 1 K23 AR061146-01 K Vincent (PI 07/01/2012-06/30/2015)

Comparative Resistance Exercise Effects on Knee Osteoarthritis Pain, Functional Impairment and Cartilage Turnover

This study will examine whether there is differential efficacy of two modes of resistance exercise (eccentrically-focused and concentrically-focused) on pain symptoms, physical function and cartilage turnover in older adults with knee osteoarthritis

2RO1 AG 17994-06 NIH, Leeuwenburgh (PI)

7/01/2006-6/30/2012

National Institute of Health/National Institute of Aging

Project Title: Molecular Mechanisms of Oxidative Stress in Aging Muscle

The major goals for this project are to study mitochondrial function, energy production and oxidative stress with age in cardiac and skeletal muscle.

Role: PI

NIA R01AG14979-10A1 (Foster)

6/6/2007–5/31/2012

Project Title: Mechanism for altered synaptic function during aging

The aim of these studies is to investigate the molecular mechanisms of synaptic function during aging and potential interventions.

Role: Co-Investigator

10PRE4310091 (Leeuwenburgh)

07/01/2010-06/30/2012

AHA Fellowship to Priya Dutta (Primary Mentor Leeuwenburgh) Mitochondrial Dysfunction and the Role of Autophagy in Cardiomyocytes.

1K23AT004251 (Anton)

NIH/NCCAM (Anton; Leeuwenburgh Co-Primary mentor)

12/1/08 – 11/30/13

Investigations of Botanicals on Food Intake, Satiety, and Weight Loss

The proposed line of research will explore the role that botanical compounds have in affecting food intake, gastrointestinal signals, satiety, and weight loss. The central hypothesis is that botanical compounds will reduce food intake in humans by stimulating neuroendocrine pathways related to satiety.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Tucker, Carolyn M.	POSITION TITLE Inaugural Florida Blue Endowed Chair in Health Disparities Research Distinguished Alumni Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) cmtucker			
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
NC A&T State University (Greensboro, NC)	BS	1971	Psychology
Howard University (Washington, DC)	Certificate	Summer, 1969	Research Fellow
University of South Carolina (Columbia, SC)	Certificate	Summer, 1970	Research Fellow
State University of New York at Stony Brook	PhD	1976	Clinical Psychology
Shands Hospital, University of Florida (Gainesville, FL)	Certificate	1975-1976	Clinical Psychology Internship

A. Personal Statement

For this proposal, I enthusiastically agree to serve as a Mentor and as an Administrative Team Leader for Diversity. Although I am not historically an aging researcher, my work on community-engaged interventions to promote health and reduce obesity in lower income African Americans has largely connected with midlife and older participants. In recent years, I have begun to collaborate heavily with other aging mentors included in this proposal (Marsiske, Anton, Manini), extending my work to older participants. Moreover, I have a very strong record of training diverse students from disadvantaged and under-represented backgrounds—one of the best at University of Florida—and I will leverage this to further grow the diversity of our predoctoral aging trainees.

Research: I have spent most of my 33-year academic career conducting research with the aim of eliminating health disparities. My work to achieve this aim continues to involve conducting two long-term, interdisciplinary, community-based participatory research programs, both of which have the mission of promoting individual and community health empowerment to promote health and prevent disease in at-risk communities. Both of these research programs specifically involve defining, assessing, and testing culturally sensitive interventions to increase health promoting behaviors (called *health-smart* behaviors) and reduce health risk behaviors among adults and families (through intervening with the primary caregivers of children) who are racial/ethnic minorities, have low household incomes, and/or are medically underserved. One of these programs is the Patient-Centered Culturally Sensitive Health Care (PC-CSHC) Research Program. Significant outcomes of this Program include (a) a published article on the definition of cultural sensitivity as defined by culturally/racially diverse primary care adult patients (via focus groups); (b) a published evidence-based PC-CSHC Theoretical Model that explains the relationship between provider cultural sensitivity and health behaviors and outcomes; (c) the PC-CSHC Inventory for adult patients to evaluate the cultural sensitivity of their providers, clinic office staff, and the clinic environment; and (d) a published PC-CSHC–Provider Form for providers and medical students to self-evaluate their cultural sensitivity as defined by adult patients. My other research program is the Culturally Sensitive Health Promotion Program. A core aspect of this Program is developing and testing my Health-Smart Behavior Model Program, which is anchored in my published Health Self-Empowerment Theory. This Model Program is designed to increase health-smart behaviors and reduce health risk behaviors, and it has been implemented with adults in churches (the Health-Smart Church Program) and in health clinics (the Health-Smart Clinic Program). Significant outcomes of my Culturally Sensitive Health Promotion Program include (a) the published adult version and child version of the *Motivators of and Barriers to Health-Smart Behaviors Inventory*, which are *landmark* health behavior assessment tools; (b) an evidence-based Health-Smart Behavior DVD; and (c) other user-friendly tools for use by community members to facilitate institutionalizing the Model Program in churches, YMCAs, or other community sites. All of the theories/models, inventories, and programs mentioned above were informed by the views of culturally diverse focus-group participants living in at-risk communities and/or by members of these communities who we have trained to be community health worker health empowerment coaches. The inventories enable what I call assessment-based, “customized,” culturally sensitive health care and health promotion. The Health-Smart Behavior Model Program has been implemented in YMCAs and other community settings in 15 cities over the past year. The Health-Smart Church Program is institutionalized in 11 churches in Florida and was recently tested in 2 Black churches and 2 Hispanic churches in Bronx, New York. My research has resulted in over 90 published, peer reviewed articles (90% first-authored) and has been funded with over \$10 million in research grants, including grants from NSF and R03 and R01 grants (Tucker, PI) from AHRQ and NIDDK. Presently, I am the Co-

Investigator (PI, Dr. Henrietta Logan) on an NIDCR center grant that funds the Southeast Center for Research to Reduce Disparities in Oral Health. My other current research collaborators on in-progress studies include two of the Co-PIs for the current grant proposal, Dr. Michael Marsiske and Dr. Penny Ralston.

Teaching: Under my mentorship, 44 doctoral students have received their PhD degrees (42% of whom are racial/ethnic minorities), and 42 graduate students have received their Master's degrees (50% of whom are racial/ethnic minorities). To date, this is the best mentorship record at the University of Florida (UF).

Leadership: I served for four years as Director of Training and Area Director in the Department of Psychology at UF, and I have directed over 50 research projects, including two recent national health-related projects. I am also the Contact PI for the UF-FAMU Community Health Workers Research and Training Institute in Florida.

Service: I am a member of numerous community groups, including the Community Advisory Board for the UF Health Disparities Research and Intervention Program, the African American Alliance of Alachua County, and the Health Promotion sub-committee of the Florida Health Disparities Research Agenda Committee.

Relevant Honors: My honors that are relevant to our conference grant application include (a) being named the Florida Blue Endowed Chair in Health Disparities Research (2012), (b) receiving the 2010 UF Outstanding Doctoral Dissertation Research Mentoring Award, (c) being named the Richard and Thelma O. C. Barney Endowed Term Professor of Health Disparities by the UF College of Medicine (2008-Present), and (d) receiving the 2009 Outstanding Service Award from the U.S. HHS Advisory Committee on Minority Health.

B. Positions and Honors

Positions and Employment

1976–	Assistant Professor, Department of Behavioral Studies, University of Florida (UF)
1982–	Licensed Practicing Clinical Psychologist (part time, PY002802), State of Florida
1977–1982	Clinical Psychologist, The Black Family Television Program, WJCT, Jacksonville, Florida
1979–1982	Assistant Professor, Department of Psychology, UF
1982–1988	Associate Professor, Department of Psychology, UF
1988–	Full Professor, Department of Psychology, UF
1993–	Distinguished Alumni Professor, UF
1995–	Affiliate Appointment, Department of Pediatrics, UF
1998–	Affiliate Appointment, Department of Community Health and Family Medicine, UF
1998–2004	Director of Training and Area Director, Department of Psychology, UF
2006–	Joint Appointment, Department of Psychology and the Department of Community Health and Family Medicine, UF
2008–	Director, UF Health Disparities Research and Intervention Program, College of Medicine, University of Florida

Honors

1985	Distinguished Teaching Award, College of Liberal Arts & Sciences, University of Florida
1989	University and Community Service Award, UF's Black Graduate Student Organization
1992	University Outstanding Teaching Award, College of Liberal Arts & Sciences, University of Florida
1993	University of Florida's Eighth Distinguished Alumni Professor
1994	University of Florida's Student Services President's Humanitarian Award
1999/2000	Distinguished Psychologist Award, North Florida Chapter of the Florida Psychological Association
2002	University of Florida President's Humanitarian Award
2003	Promotion of Cultural Sensitivity Award, Association of Black Psychologists
2003	Florida Blue Key Distinguished Faculty Award
2005	William R. Jones Most Valuable Mentor Award, Florida Education Fund
2006	Appointed to the Editorial Board of the <i>Journal of the National Medical Association</i>
2006	Dorothy Booz Black Award for Outstanding Research in Counseling Health Psychology, Division 17 of the American Psychological Association
2006	University Scholarship of Engagement Award for Outstanding Community Research, UF College of Education
2007	Awarded the distinction of "Fellow Status" from Division 17 of the American Psychological Association
2007	Appointed to the 2005-2008 HHS Advisory Committee on Minority Health, and was selected to be the lead author of this committee's first report, titled "Reducing Health Disparities by Promoting Patient-Centered Culturally and Linguistically Sensitive/Competent Health Care"

2008	Selected to serve on the 2008 Expert Panel for the YMCA of the USA Diversity Health and Wellness Collaborative
2008	Recipient of the University of Florida Research Foundation (UFRF) Professorship Award
2008	Named the Richard and Thelma O. C. Barney Endowed Term Professorship of Health Disparities in the College of Medicine, University of Florida [2008-2012]
2009	Outstanding Service Award, U.S. HHS Advisory Committee on Minority Health
2010	Outstanding Doctoral Dissertation Advising and Mentoring Award, Graduate School, UF
2012	Named Florida Blue Endowed Chair in Health Disparities Research
2012	Reappointed to the Richard and Thelma O. C. Barney Endowed Term Professorship of Health Disparities in the College of Medicine, University of Florida [2012-2015]
2012	Recipient of the 2012 Elizabeth Hurlock Beckman Award
2012	Selected to join the Division 38 Health Research Council of the American Psychological Association
2012	Recipient of the Spirit of Gainesville Award in Medicine
2013	Recipient of the 2013 Ebony Appreciation Pioneer Award

C. Selected Peer-Reviewed Publications (most recent selected from peer-reviewed publications)

Publications Most Relevant to the Current Application (asterisks indicate former or present students)

1. **Tucker, C.M.**, Mirsu-Paun, A.*, van den Berg, J.J.*, Ferdinand, L.A.*, Jones, J.D.*, Curry, R.W., Rooks, L.G., Walter, T.J., & Beato, C. (2007). Assessments for measuring patient-centered cultural sensitivity in community-based primary care clinics. *Journal of the National Medical Association*, 99(6), 609-619.
2. **Tucker, C.M.**, & Herman, K.C.* (2007). Resolving the paradoxes of and barriers to patient-centered culturally sensitive health care: Lessons from the history of counseling and community psychology. *The Counseling Psychologist*, 35(5), 735-743.
3. **Tucker, C.M.**, Ferdinand, L.A.*, Mirsu-Paun, A.*, Herman, K.*, Delgado-Romero, E.*, van den Berg, J.J.*, & Jones, J.D.* (2007). The roles of counseling psychologists in reducing health disparities. *The Counseling Psychologist*, 35(5), 650-678.
4. Jackson, E.S.*, **Tucker, C.M.**, & Herman, K.C.* (2007). Health value, perceived social support, and health self-efficacy as factors in a health-promoting lifestyle. *Journal of American College Health*, 56(1), 69-75.
5. **Tucker, C.M.**, Butler, A.M., & Loyuk, I.S.*, Desmond, F.F.*, & Surrency, S.L. (2009). Predictors of a health promoting lifestyle among low-income African American mothers and White mothers of chronically ill children. *Journal of the National Medical Association*, 101(2), 103-110.
6. Jones, J.D.*, **Tucker, C.M.**, & Herman, K.C.* (2009). Stress and nutrition among African American women with hypertension. *American Journal of Health Behavior*, 33(6), 661-672.
7. Bragg, M.A.*, **Tucker, C.M.**, Kaye, L.B.*, & Desmond, F.F.* (2009). Motivators of and barriers to physical activity: Perspectives among low-income culturally diverse adolescents and adults. *American Journal of Health Education*, 40(3), 146-154.
8. **Tucker, C.M.**, Daly, K.*, & Herman, K.* (2010). *Customized multicultural health counseling: Bridging the gap between mental and physical health for racial and ethnic minorities*. Handbook of Multicultural Counseling (3rd Ed.). California: Sage Publications.
9. Mirsu-Paun, A.*, & **Tucker, C. M.** (2010) Validation of a self-report inventory for measuring patient-centered cultural sensitivity in health care using a sample of medical students. *Journal of Community Health*, 35(2), 198-207.
10. **Tucker, C.M.**, Rice, K.G., Hou, W., Kaye, L.B.*, Nolan, S.E.*, Grandoit, D.J.*, Gonzales, L.*, Smith, M.B., & Desmond, F.F.* (2011). Development of the Motivators of and Barriers to Health-Smart Behaviors Inventory. *Psychological Assessment*. Advance online publication.
11. **Tucker, C.M.**, Marsiske, M., Rice, K.G., Jones, J.D.*, & Herman, K.C.* (2011). Patient-Centered Culturally Sensitive Health Care: Model Testing and Refinement. *Health Psychology*, 30(3), 342-350.
12. Kaye, L.B.*, **Tucker, C.M.**, Bragg, M.A.*, & Estampador, A.C.* (2011). Low-Income Children's Reported Motivators of and Barriers to Healthy Eating Behaviors: A Focus Group Study. *Journal of the National Medical Association*. 103(9-10), 941-951.

13. **Tucker, C.M.**, Rice, K.G., Desmond, F.*, Hou, W., Kaye, L.B.*, & Smith, T.* (2011). The Motivators of and Barriers to Health-Smart Behaviors Inventory – Youth Form. *Psychological Assessment*. 24(2), 490-502. doi: 10.1037/a0026262
14. Mirsu-Paun, A.*, **Tucker, C.M.**, Hardt, N.S. (2012). Medical student's self-evaluations of their patient-centered cultural sensitivity: Implications for cultural sensitivity/competence training. *Journal of the National Medical Association*. 104(1-2), 38-45.
15. Mirsu-Paun, A. *, **Tucker, C. M.**, & Armenteros, E. M. (2012). Family interaction patterns and their association with family support among women with breast cancer. *Cancer Nursing*. 35(3), E11-E21.

D. Research Support

Ongoing Research Support (Selected Relevant Grants)

Project # 2012122

Blue Foundation Tucker (PI) 3/15/12-3/14/13
 Development of the African Methodist Episcopal (AME) Health-Smart Church Model Program
 The major goal of this program is to develop a model for establishing the evidence-based Health-Smart Church Program for Overcoming and Preventing Obesity in AME churches throughout Florida.

Completed Research Support (Selected Relevant Grants)

Project UPN # 07060563

Robert Wood Johnson Foundation Tucker (PI) 4/1/07–5/15/09
 The Culturally Sensitive Health Care and Health Promotion Project
 The goals of this project were to (a) use a national sample to develop culturally sensitive health care assessments, (b) demonstrate how training primary care patients to use culturally sensitive health care feedback assessments and to engage in health-smart behaviors can positively impact the health care quality and health status/outcomes of culturally diverse patients, and (c) show how health promotion can be integrated into medicine.

Project UPN # 08102806

Blue Foundation for a Healthy Florida Tucker (PI) 1/1/09–4/31/10
 The Health-Smart Church Program
 The goal of this program was to increase health-smart behaviors and healthy cooking practices to improve health status indicators (i.e., blood pressure, BMI, triglycerides, and cholesterol levels) among hypertensive and/or overweight/obese low-income African American women.

Project # 00091084

PepsiCo, Inc. Tucker (PI) 10/15/10–10/14/11
 The Bronx Health-Smart Church Program
 The major goal of this program is to establish community health promotion centers in African American and Hispanic/Latino churches in Bronx, New York, with a major focus on increasing health-smart behaviors among adults at these churches.

Project # F10C24

Florida Board of Governors Tucker (Contact-PI) 11/9/10 – 11/9/11
 The University of Florida (UF)-Florida A&M University (FAMU) Community Health Workers Research and Training Institute
 The goals of this project are to (a) develop and formalize a structured credentialing program for training community health workers (beginning with training health empowerment coaches), (b) empirically evaluate the fidelity and effectiveness of this training, and (c) establish the UF-FAMU Community Health Worker Research and Training Institute through which such training and related research will be fostered.

Project # 00088154

National Institute on Aging (NIH) Tucker (Co-PI) 9/19/08–5/31/12
 Southeast Center for Research to Reduce Disparities in Oral Health
 The purpose of this center is to identify factors that impede oral cancer screenings and to test the impact of community targeted oral health promotion interventions to promote oral health and related cancer screenings.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Horgas, Ann L.	POSITION TITLE Associate Professor		
eRA COMMONS USER NAME AHORGAS			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Pennsylvania State University	B.S.	1980	Nursing
Pennsylvania State University	M.S.	1987	Nursing
Pennsylvania State University	Ph.D.	1992	Human Development & Family Studies
Free University of Berlin, Berlin, Germany	Post-doctoral Fellow	1995	Gerontology & Geriatrics

A. Personal Statement

I enthusiastically continue my decade-long involvement with this T32 predoctoral program as a mentor. I also agree to rejoin the T32 leadership team as the Team Leader for Evaluation. I have mentored past funded and unfunded trainees (as documented in the proposal). While at UF, I have served on 23 graduate committees; I have been Chair or Co-Chair for 12 students.

As I note in my letter of support, I was one of the founding developers of our programming (stemming back to our joint work in developing a similar program at Wayne State University), and I have played a role as a member of your Graduate Recruitment and Training Committee (GRTC) and as a Mentor. We functioned as an unfunded program, developing our operating principles, starting in 2000, and seamlessly moved into the funded program beginning in 2003.

As a member of your GRTC, I agree to serve as the team leader for student tracking and progress review. In this role, I'll ensure that all trainees have their triannual mentoring committee meetings, and I will review their progress reports. In our monthly GRTC meetings, we'll review all trainees, and flag any issues or concerns that need to be further addressed. I'll also work with you and the rest of the GRTC on student recruitment and retention issues.

I believe I have relevant role experience for playing this function. Not only have I previously played this role for the T32/GRTC (prior to 2004), but from 2002-2010 I served as the Associate Dean for Research in our University of Florida College of Nursing. In that role, I developed goal statements, tracked productivity, and mentored junior faculty and doctoral students. I will leverage much of this experience for the T32.

Substantively, my work is tightly aligned with the focus on aging and the prevention of disability. Much of my research has focused on nursing home environments, both in the area of behavior management of problem behaviors (a focus that is aligned with our external advisory board member, Dr. Ann Kolanowski), but I have also worked extensively on the issue of medication use – particularly analgesic use – in older adults. Some of our work (including some done with our past trainee, Amanda Floetke Elliot, Ph.D.) suggests that effective pain management may serve as an intervention for the reduction of problem behaviors in persons with dementia. More recently, as co-PI of the University of Florida site of the ACTIVE study, we have been working on identifying the role of prescription medications in influencing cognitive training outcomes and predicting disability trajectories in study participants.

B. Positions and Honors

Positions and Employment

1992-1995	Post-doctoral Fellow, Free University of Berlin, Berlin, Germany
1995-2000	Assistant Professor, Institute of Gerontology & College of Nursing, Wayne State University

2000-present Associate Professor, College of Nursing, University of Florida, Gainesville, FL
2004-2009 Associate Dean for Research, College of Nursing, University of Florida, Gainesville, FL

Other Experiences and Professional Memberships

1987- Member, Gerontological Society of America
1993 Invited Fellow, University of Health Sciences, Jönköping, Sweden
1999 Visiting Research Scientist, Free University of Berlin and Max Planck Institute for Human Development, Berlin, Germany
2000- Member, American Society of Pain Management Nurses
2003- Ad hoc Reviewer, Scientific Review Committee, National Institutes for Health, Center for Scientific Review & National Institute on Aging
2005- Scientific Review Committee, US Veterans Administration HSR&D Study Section
2005- Member, American Pain Society
2007- Scientific Review Committee, National Palliative Care Research Center

Honors

1998 Undergraduate Mentorship Recognition Award, Wayne State University
2000 Harriet H. Werley New Investigator Award, Midwest Nursing Research Society
2000 Nightingale Award for Excellence in Nursing Research, Oakland University, MI
2002 Springer Award for Geriatric/Gerontological Nursing
2002 Fellow, Gerontological Society of America
2003 Southern Nursing Research Society Hartford Institute Geriatric Nursing Award
2005 Fellow, American Academy of Nursing
2006 Rose and George Doval Award for Excellence in Nursing Education, New York University
2007 Faculty Achievement Recognition Award, University of Florida
2010 - 2012 University of Florida Research Professorship

C. Selected Peer-Reviewed Publications (in chronological order)

Most relevant to the current application

1. **Horgas, A. L., & Tsai, P. F.** (1998). Analgesic drug prescription and use in cognitively impaired nursing home residents. *Nursing Research*, 47, 235-242. PMID: 9683119
 2. **Horgas, A. L., & Dunn, K.** (2001). Pain in nursing home residents: Comparison of residents' self-report and nursing assistants' perceptions. *Journal of Gerontological Nursing*, 27 (3), 44-53. PMID: 11915257
 3. **Horgas, A. L.** (2003). Pain management in elderly adults. *Journal of Infusion Nursing*, 26, 161-165. PMID: 12792374
 4. **Horgas, A. L.** (2003). Try this: Assessing pain in persons with dementia. *Hartford Institute for Geriatric Nursing, Division of Nursing*, New York, 1(2).
 5. **Horgas, A. L., & Elliott, A. F.** (2004). Pain assessment and management in persons with dementia. *Nursing Clinics of North America*, 39 (3), 593-606. doi:10.1016/j.cnur.2004.02.013
 6. **Horgas, A. L., Nichols, A. L., Schapson, C. A., & Vieites, K.** (2007). Assessing pain in persons with dementia: Relationships between the NOPPAIN, self-report, and behavioral observations. *Pain Management Nursing*, 8, 77-85. doi:10.1016/j.pmn.2007.03.003
 7. **Horgas, A. L., & Yoon, S. L.** (2008). Pain management. In E. Capezuti, D. Zwicker, M. Mezey & T. Fulmer, (Eds.), *Evidence-based Geriatric Nursing Protocols for Best Practice (3rd ed.)* (pp. 199-222). New York: Springer.
 8. **Horgas, A. L., Elliott, A. F., & Rodriguez, C.** (2008). Pain assessment instruments. In E. A. Capezuti, E. L. Siegler, & M. D. Mezey, M.D. (Eds.), *The Encyclopedia of Elder Care (2nd ed.)* (pp. 600-603). New York: Springer Publishing Company.
 9. Elliott, A. F., **Horgas, A. L., & Marsiske, M.** (2008). Nurses' role in identifying mild cognitive impairment in older adults. *Geriatric Nursing*, 29 (1), 38-47. PMID: PMC2268752
 10. **Horgas, A. L., & Miller, L. A.** (2008). Pain assessment in persons with dementia. *American Journal of Nursing*, 108 (7), 62-70. doi: 10.1097/01.NAJ.0000325648.01797.fc
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11. **Horgas, A. L.**, Yoon, S. L., Nichols, A. L., & Marsiske, M. (2008). The relationship between pain and functional disability in black and white older adults. *Research in Nursing and Health*, 31 (4), 341-54. doi: 10.1002/nur.20270
12. Elliott, A. F., & **Horgas, A. L.** (2009). Effects of an analgesic trial in reducing chronic pain behaviors in community-dwelling persons with dementia. *Nursing Research*, 59 (2), 140-145. doi: 10.1097/NNR.0b013e318199b599
13. **Horgas, A. L.**, Floetke, A. L., & Marsiske, M. (2009). Pain assessment in persons with dementia: Relationship between self-report and behavioral observations. *Journal of the American Geriatrics Society*, 57 (1), 126-132. doi: 10.1111/j.1532-5415.2008.02071.x
14. Glover, T.L., Goodin, B.R., **Horgas, A.L.**, Kindler, L.L., King, C.D., Sibille, K.T., Peloquin, C.A., Riley, III, J.R., Staud, R., Bradley, L.A., & Fillingim, R.B. (2012). Vitamin D, race, and experimental pain sensitivity in older adults with knee osteoarthritis. *Arthritis & Rheumatism*, 64(12), 3926-3935. DOI 10.1002/art.37687.
15. Ahn, H., & **Horgas, A.** (2013). The relationship between pain and disruptive behaviors in Florida nursing home residents with dementia. *BMC Geriatrics*, 13, 14. doi: 10.1186/1471-2318-13-14.

C. Research Support

Current Research Support

R01 1R01NR014181 Price (PI)

09/27/12-06/30/17

NIH/NINR

"Neuroimaging biomarkers for post-operative cognitive decline in older adults"

The primary goal of the proposed project is to investigate pre-surgery neuronal vulnerability/health predictors of post-operative cognitive change after orthopedic surgery.

Role: Co-investigator

HT9404-12-1-TS04 N12-008 (Daniel (PI)

06/01/2012-05/30/2013

Triservice Nursing Research Program

"Effect of Psychosocial Factors on Acute and Persistent Pain Following Childbirth"

Role: Co-Principal Investigator

The goal of this project is to investigate psychosocial factors that are predictive of acute pain following childbirth and the development of persistent pain 6 months later.

Completed Research Support

R56 DE013208 Robinson (PI)

09/01/2008-08/31/2012

NIH/NIDCR

"Pain Treatment Decisions: Influence of Sex, Race and Age"

The overall goal of the project is to assess the influences of sex, race/ethnicity, age, and pain on health care providers (Dentists, Physicians, and Nurses) decisions about pain treatment.

Role: Co-Investigator

U01 AG014276 Marsiske (PI)

05/01/2008 - 03/30/2013

NIH / NIA

"ACTIVE Phase III: UF/WSU Field Site"

The major goals of this project are to investigate the effects of training in basic intellectual abilities on older adults' abilities to perform tasks of daily living.

Role: Co-Principal Investigator

U01 AG014276-S7 Marsiske (PI)

01/01/2006 - 12/31/2006

NIH / NIA

"ACTIVE Phase II: UF/WSU Field Site" - Supplement

The major goals of this project are to investigate the effects of training in basic intellectual abilities on older adults' abilities to perform tasks of daily living.

Role: Co-Principal Investigator

F31 NR009148 Dungan (PI)

09/30/2004 - 09/29/2005

Principal Investigator/Program Director (Last, First, Middle):

NIH / NINR

“Race, HTN, and Vascular Adrenoceptor Gene Expression”

The purpose of this study is to examine the roles that race and gene expression of the α_1 - and β_2 -adrenergic receptors play in human hypertension.

Role: Co-Principal Investigator/Mentor

No agency project # Floetke (PI)

08/01/2003 - 12/26/2005

American Academy of Nursing / John A. Hartford Foundation

“John A. Hartford / American Academy of Nursing Building Academy Geriatric Capacity Scholarship Application (Pre-Doctoral)”

The aim of this project is to compare three observational measures of pain assessment in terms of their sensitivity and specificity by observing pain in both cognitively impaired older adults completing an activity-based protocol before and after analgesia administration.

Role: Co-Principal Investigator/Mentor

P20 NR007791 Stechmiller (PI)

08/01/2001 - 07/31/2005

NIH / NINR

“Biobehavioral Research Center”

The major goals of this project are to provide the infrastructure for faculty to develop state-of-the-art research that integrates biological and behavioral sciences.

Role: Administrative & Pilot Core Member

R01 NR005069 Horgas (PI)

09/01/2001 - 08/31/2004

NIH / NINR

“Pain Assessment in Nursing Home Residents”

The major goal of this research was to investigate verbal and non-verbal expressions of pain in elderly adults, with and without dementia.

Role: Principal Investigator

WSU0037 / U01 AG014276 Marsiske (PI)

09/30/1996 - 03/31/2005

Wayne State University / NIH/NIA

“Fluid Reasoning Training for Urban Elders: Active Trial”

The long-term goal of this multi-site trial was to reduce the increasing public health problems of need for formal care, hospitalization, and substantial loss of independence in the nation's growing older population.

Role: Co-Principal Investigator

Senior, Funded Primary Mentors

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Lori J. P. Altmann, Ph.D.	POSITION TITLE Associate Professor & Associate Chair Speech, Language & Hearing Sciences University of Florida		
eRA COMMONS USER NAME LALTMANN			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
McGill University, Montreal, P.Q., Canada	BA	1977	Linguistics
California State University, Fullerton, CA	MA	1991-1992	Linguistics
University of Southern California, Los Angeles, CA	Ph.D.	1992-8/1998	Linguistics
University of Kansas, Lawrence, KS	Post-doc	2000-2003	Cognitive Psychology

A. Personal Statement

I enthusiastically agree to continue to serve as a mentor with this T32 program. I have long expressed my direct support for this program, and served as a member of your Graduate Recruitment and Training Committee for over 5 years. While at UF, I have served on 38 graduate committees; I have been Chair or Co-Chair for 10 students.

My research has two primary foci. The first examines interactions between cognition and language ability in a variety of adult populations (including healthy older adults, stroke, dyslexia, Alzheimer's and Parkinson's disease). The second investigates cognitive –motor interference (dual task costs) when language and cognitive tasks are completed simultaneously with motor tasks. My extensive experience in analyzing the language production of older adults and in working with kinesiologists on joint projects investigating cognitive, linguistic and motor interactions makes me extremely qualified to provide the language and cognitive analyses proposed in this project. The protocol for the language task was designed by me and has been used extensive with healthy young and older adults, as well as with people with Parkinson's disease. \

B. Positions and Honors

Positions and Employment

1992-1995	Predocotrinal trainee. NIA grant # 2T32AG00037, Multidisciplinary Training Grant in Gerontology, University of Southern California. Vern Bengtson, Ph.D., Principal Investigator.
1998 - 2000	Visiting Assistant Professor, Applied Linguistics, Georgia State University.
2000 - 2003	Post-doctoral Fellow. NIA grant #AG00226, Communication and Aging, University of Kansas. Susan Kemper, Ph. D., Principal Investigator.
2003 - 2011	Assistant Professor, Communication Sciences and Disorders, University of Florida.
2011 – 2012	Associate Professor, Speech, Language, & Hearing Sciences, University of Florida
2012 – present	Associate Professor and Associate Chair of Ph.D. Education; Department of Speech, Language, & Hearing Sciences, University of Florida

Other Experience and Professional Memberships

2003 – Present	Director of Language over the Lifespan Laboratory, UF
2003 – Present	Graduate Research Training Faculty, Gerontology Training faculty, UF
2003 – 2009	Affiliate VA RR&D Brain Rehabilitation Research Center for Excellence at the Malcom Randal VA Medical Center

2004 – Present Founder and Director of the UF Language and Brain Interest Group
2009 – Present Doctoral Student Advisor, Speech, Language, & Hearing Sciences, University of Florida

Member: American Psychological Association, International Neuropsychological Society, American Speech and Hearing Association, Society for the Scientific Study of Reading

C. Selected peer-reviewed publications (in chronological order).

1. **Altmann, L. J. P.**, Kempler, D., & Andersen, E. S. (2001). Speech production in Alzheimer's disease: Re-evaluating morphosyntactic preservation. *Journal of Speech, Language, and Hearing Research*, 44, 1069-1082. PMID 11708528
2. **Altmann, L. J. P.** (2004). Constrained sentence production in probable Alzheimer's disease. *Applied Psycholinguistics*, 25, 145-173. doi: 10.1017/S0142716404001080
3. **Altmann, L. J. P.** & Kemper, S. (2006). Age differences in sensitivity to animacy and order of activation in sentence production. *Language and Cognitive Process*, 21, 322-354. DOI: 10.1080/0169096054400006
4. **Altmann, L. J. P.**, Lombardino, L. J., & Puranik, C. S. (2008). Sentence production in students with dyslexia. *International Journal of Language and Communication Disorders*, 43, 55-76. PMID 17852523
5. Plummer-D'Amato, P., **Altmann, L. J. P.**, Saracino, D., Fox, E., Behrman, A. L., & Marsiske, M. (2008). Interactions between cognitive tasks and gait after stroke: A dual task study. *Gait & Posture*, 27(4), 683-688. PMC2913384
6. Del Toro, C. M., **Altmann, L. J. P.**, Raymer, A. M., Leon, S., Blonder, L. X., Rothi, L. G. R. (2008). Changes in aphasic discourse after contrasting treatments for anomia. *Aphasiology*, 22, 881-892. DOI: 10.1080/02687030701844204
7. Wiseheart, R., **Altmann, L. J. P.**, Lombardino, L. J., & Park, H. (2009). Sentence Comprehension in Young Adults with Developmental Dyslexia. *Annals of Dyslexia*, 59, 151-167. PMID 19911285
8. Nocera, J., **Altmann, L. J. P.**, Sapienza, C. M., Okun, M. S. & Hass, C. J. (2010). Can Exercise improve language and cognition in Parkinson's disease? A Case Report. *Neurocase*, 12 (Apr), 1-6. PMID 20391181
9. Plummer-D'Amato, P., **Altmann, L. J. P.**, Behrman, A. L., & Marsiske, M. (2010). Interference between cognition, double limb support, and swing during gait in community-dwelling individuals post stroke. *Neurorehabilitation and Neural Repair*. PMC2923473
10. Rogalski, Y., **Altmann, L. J. P.**, Plummer-D'Amato, P., Behman, A. L., & Marsiske, M. (2010). Discourse coherence and cognition after stroke: A dual task study. *Journal of Communication Disorders*. DOI:10.1016/j.jcomdis.2011.02.001
11. Morelli, C. A., **Altmann, L. J. P.**, Kendall, D., Fischler, I., & Heilman, K. M. (2011). Effects of a semantic elaboration and typicality on picture naming in Alzheimer Disease. *Journal of Communication Disorders*, 44, 413-428. DOI:10.1016/j.jcomdis.2011.01.006
12. Plummer-D'Amato, P., **Altmann, L. J. P.**, & Reilly, K. (2011). Dual task effects of spontaneous speech and executive function on gait in aging: Exaggerated effects in slow walkers. *Gait and Posture*, 33, 233-237. DOI:10.1016/j.gaitpost.2010.11.011
13. **Altmann, L. J. P.** & Troche, M. S. (2011) High-level language production in Parkinson's disease: A review. *Parkinson's Disease*, 33, 225-251. DOI:10.4061/2011/238956
14. Troche, M. S. & **Altmann, L. J. P.** (2012). Sentence production in Parkinson's disease: Effects of task and conceptual complexity. *Applied Psycholinguistics*, 33, 225-251. DOI:10.1017/S0142716411000336

15. Plummer-D'Amato, P. & **Altmann, L. J. P.** (2012). Relationships between motor function and gait-related dual task interference after stroke: a pilot study. *Gait and Posture*, 35, 170-172. DOI:10.1016/j.gaitpost.2011.08.015

D. Other Support

Current

R21AG033284

Altmann, L. & Hass, C. (PI) 7/12/10-6/30/12 2.01 calendar months
NIH/NIA \$ 336,489

Language and executive function in Parkinson's disease: Effects of dual tasks and exercise.

The purpose of this grant is to test whether aerobic or stretch/balance exercise can lead to improved cognitive performance and language production in individuals with Parkinson's Disease. Testing is carried out in both single and dual task settings, under the assumption that more robust changes will affect performance in both, but more tenuous changes will affect only single task performance.

Altmann, L (Co-I), Sonke, J. (PI) 10/1/12 – 9/30/13 1.2 calendar months

Parkinson's Research Foundation \$8200/\$30,495

Dance for Life: Assessing the effects of dance on motor and non-motor function in Parkinson's Disease.

This grant applies the same methodology as the NIH R21 above, using dance as the exercise intervention. Pre and post intervention testing is carried out in single and dual task conditions.

Completed

Effects of Tai Chi on Physical Performance, Functional Limitation and Disability

Roberts, Beverly, PI. Role: Investigator

University of Florida Opportunity Fund (Roberts) 6/1/06-5/31/08 \$72,295

The purpose of this grant was to refine a 16-week tai chi program and to estimates of effect sizes for this intervention on physical performance, functional limitations, cognitive-motor interference and disability.

Grammatical Function in Alzheimer Disease.

Role: Principal Investigator. \$5000. July 2005-2006.

American Speech and Hearing Association.

The purpose of this award to explore the production of grammatical sentences by individuals with Alzheimer Disease.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Bauer, Russell M	POSITION TITLE Professor Department of Clinical and Health Psychology University of Florida		
eRA COMMONS USER NAME (credential, e.g., agency login) rbauer			
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
Lafayette College, Easton, PA	B.A.	06/75	Psychology
Pennsylvania State Univ, University Park, PA	M.S.	6/77	Clinical Psychology
Pennsylvania State Univ, University Park, PA	Ph.D.	11/79	Clinical Psychology
Predoctoral Internship	N/A	8/80	Clinical Psychology - Neuropsychology

A. Personal Statement

I am pleased to remain as a mentor in our predoctoral T32 program in aging. I have a long record of producing highly accomplished predoctoral trainees. While at UF, I have served on 207 graduate committees; I have served as Chair or Co-Chair 54 times.

My research program is broadly focused on the role of medial temporal lobe structures in normal and disordered (e.g., **aging**, epilepsy) memory function. We have used various human models to study memory processes, including complex partial epilepsy of temporal lobe origin, **preclinical dementia, and normal aging of memory systems** to investigate structure-function relationships in medial temporal lobe. Because this system has intricate connections with frontal-striatal systems involved in action and intention, we are also interested in frontal-temporal interactions in producing memory drive and prospective memory. I have mentored 2 F31 NRSA predoctoral scholars (Schramke, Leritz) and 1 F32 scholar (Thomas), have chaired over 30 Ph.D. committees and have served on over 100 other M.S. and Ph.D. supervisory committees. UF recognized the outstanding outcomes my students have achieved by awarding me one of 5 campuswide Doctoral Dissertation Advisor/Mentoring Awards in 2003-2004. I believe in providing students sufficient resources and guidance to allow them to pursue their ideas, but do not require them to conform to a particular research agenda. As a result, the dissertation topics emanating from my laboratory have been quite diverse, and in many cases have allowed students to pursue varied academically oriented trajectories. Currently, our research provides students the opportunity to receive training in experimental neuropsychological techniques translated from animal paradigms (virtual water maze, visual discrimination/delayed nonmatching to sample, transitive inference), structural imaging techniques including ROI segmentation and high angular resolution diffusion imaging, and community-based approaches that utilize iPad technology to interactively assess memory and cognitive disorders.

B. Positions and Honors

Positions and Employment

1979-1980	Chief Resident	Department of Clinical Psychology, University of Florida
1980-1985	Assistant Professor	Department of Clinical and Health Psychology
1985-1996	Associate Professor	Department of Clinical and Health Psychology
1996-pres	Professor	Department of Clinical and Health Psychology

Other Experience and Professional Memberships

1987-1992	Director of Intern Training, APA-Accredited Predoctoral Internship in Clinical Psychology
6/90 - 11/90	Visiting Scientist, Memory Disorders Research Center, Boston Veterans Administration Medical Center, Boston, MA

2000-2006	Program Director, Clinical Psychology Doctoral Program; Associate Chair for Academic Affairs, Department of Clinical and Health Psychology
2006-2011	Chair, Department of Clinical and Health Psychology
2004	Board Certified in Clinical Neuropsychology, American Board of Clinical Neuropsychology ABPP
1999-2004	Chair, BBBP-4 Review Committee, Center for Scientific Review, NIMH

Honors

President, International Neuropsychological Society, 2011-2012; President-Elect, 2009-2011
Distinguished Neuropsychologist, American Academy of Clinical Neuropsychology, 2006
President, American Psychological Association Division of Clinical Neuropsychology (40), 2005- 2006
University of Florida 2003-2004 Doctoral Dissertation Advisor/Mentoring Award
University of Florida Teaching Incentive Program (TIP) Award, 1998-1999
Fellow, American Psychological Association, 1998
Department of Clinical and Health Psychology Teaching Excellence Award, 1988, 1995, 2008.
Florida Psychological Association, Outstanding Psychological Research Award, June 1992.
College of Health Related Professions Teacher of the Year Award, April 1988.
United States Public Health Service Fellow (1975-1977)

C. Selected Peer-reviewed Publications (Selected from 96 peer-reviewed publications)

Most relevant to the current application (student, intern, or postdoctoral co-authors in italics)

1. *McDonald, C. R.*, Bauer, R. M., Filoteo, J. V., *Grande, L.*, Roper, S. N., & Gilmore, R. (2006). Episodic memory in patients with focal frontal lobe lesions. *Cortex*, 42, 1080-1092. (PMID 17209414)
2. Bauer, R.M. (2008). The three amnesias. In J.E. Morgan & J.H. Ricker (Eds.), *Textbook of Clinical Neuropsychology*, pp. 729-742. NewYork: Psychology Press.
3. *Demery, J.A.*, *Larson, M.J.*, *Dixit, N.K.*, Bauer, R.M., & Perlstein, W.M. (2010). Operating characteristics of executive functioning tests following traumatic brain injury. *The Clinical Neuropsychologist*, 24, 1292-1308 (PMID 21069617)
4. Bauer, R.M. Reckess, G., Kumar, A. and Valenstein, E. (2012). Amnesic disorders. In K.M. Heilman and E. Valenstein (Eds.), *Clinical Neuropsychology (5th Ed.)*, pp. 504-581. New York: Oxford University Press.
5. *Reckess, G. Dunn, C.B.*, Bauer, R.M. & Leonard, C.M. (in press). Anterior temporobasal sulcal morphology: Development of a reliable rating protocol and normative data. *Brain Structure and Function*.

Additional recent publications (in chronological order)

1. Leritz, E.C., Grande, L.J., & Bauer, R.M. (2006). Temporal lobe epilepsy as a model to understand human memory: the distinction between explicit and implicit memory. *Epilepsy & Behavior*, 9, 1-13. (PMD 16759913)
2. *Seignourel, P.J.*, *Miller, K.*, *Kellison, I.*, Rodriguez, R., Fernandez, H.H., Bauer, R.M., Bowers, D., & Okun, M.S. (2007). Abnormal affective startle modulation in individuals with psychogenic movement disorder. *Movement Disorder*, 22, 1265-1271. (PMID 17486611)
3. Attix, D.K., Donders, J., Johnson-Greene, D., Grote, C.L., Harris, J.G., & Bauer, R.M. (2007). Disclosure of test data: official position of Division 40 (Clinical Neuropsychology) of the American Psychological Association, Association of Postdoctoral Programs in Clinical Neuropsychology, and American Academy of Clinical Neuropsychology. *The Clinical Neuropsychologist*, 21, 232-238. (PMID 17455015)
4. Conway, T., Heilman, K.M., Gopinath, K., Peck, K., Bauer, R.M., Briggs, R.W., Torgesen, J.K., & Crosson, B. (2008). Neural substrates related to auditory working memory in dyslexia: An fMRI study. *Journal of the International Neuropsychological Society*, 14, 629-639. (PMID 18577292)
5. Loring, D.W. & Bauer, R.M. (2010). Testing the limits: Cautions and concerns regarding the new Wechsler IQ and memory scales. *Neurology*, 74, 685-690. (PMID 20177123)
6. Goodman, W.K., Foote, K.D., Greenberg, B.D., Ricciuti, N., Bauer, R.M., Ward, H., Shapira, N.A., Wu, S.S., Hill, C.L., Rasmussen, S.A., & Okun, M.S. (2010). Deep brain stimulation for intractable obsessive compulsive disorder: Pilot study using a blinded, staggered-onset design. *Biological Psychiatry*, 67, 535-542. (PMID 20116047)

7. Kirsch-Darrow, L. Marsiske, M., Okun, M.S., Bauer, R., & Bowers, D. (2011). Apathy and depression: separate factors in Parkinson's disease. *Journal of the International Neuropsychological Society*, 17, 1058-1066. (PMID 22040900)
8. Zahodne, L.B., Bowers, D., Price, C.C., Bauer, R.M., Nisenzon, A., Foote, K.D., & Okun, M.S. (2011). The case for testing memory with both stories and word lists prior to DBS surgery for Parkinson's disease. *The Clinical Neuropsychologist*, 25, 348-358. (PMID 21491347)
9. Bauer, R.M., Iverson, G.L., Cernich, A.N., Binder, L.M., Ruff, R.M., & Naugle, R.I. (2012). Computerized neuropsychological assessment devices: Joint Position Paper of the American Academy of Clinical Neuropsychology and the National Academy of Neuropsychology. *The Clinical Neuropsychologist*, 26, 177-196 (also published 2012 in *Archives of Clinical Neuropsychology*, 27, 362-373. (PMID 22394228)
10. Kuhn, T. and Bauer, R.M. (2012). Episodic and semantic memory disorders. In L.D. Ravdin & H.L. Katzen (Eds.), *Handbook on the Neuropsychology of Aging and Dementia: Clinical Handbooks in Neuropsychology*. New York: Springer Science and Business Media.

D. Research Support

Ongoing Research Support

Bauer, R.M. (PI). "Connecting Temporal Lobe Structure and Function in OIF/OEF Veterans with mTBI". VA Rehabilitation Research and Development/Brain Rehabilitation Research Center Innovation Pilot Program. 3/2013 – 2/2014. \$33,799; Person months: 4.0

Purpose: To establish relationships between abnormalities in temporal lobe microstructure and memory impairment in veterans with mTBI for purposes of determining whether subtypes of structure-function abnormality exist that would differentially predict response to memory rehabilitation in OIF/OEF veterans. The results of the study will have implications for developing more personalized treatment approaches in the aftermath of mTBI.

Bauer, R.M. (PI), Wang, K., Dore, S., Ahn, A., & FitzGerald, D. (pilot project PI's). "Phenomics of Traumatic Brain Injury, Recovery, and Rehabilitation: The University of Florida Traumatic Brain Injury Research Group (UF-TBIRG)." Brain and Spinal Cord Injury Research Trust Fund 2013-2014; \$200,000. Person months: 1,2 (contributed)

Purpose: To utilize a phenomics approach to the study of traumatic brain injury attempts to link variations in phenotypic presentation after TBI to candidate genomic and proteomic biomarkers, and to the study and validation of signs, symptoms, and signatures of disruption at the cellular and neural systems levels that describe the key disabilities produced by traumatic injury to the brain. We seek a genome-to-syndrome characterization of how primary and secondary mechanisms of injury produce disruption in cellular and neural systems and signaling pathways to produce neurobehavioral impairment and real-life functional disability, and seek to apply such knowledge to develop more effective treatments of TBI-associated symptoms and syndromes.

Nelson, D.R., Bauer, R.M. (Project PI) & Schenkman, B. "UF-FSU Community Research Collaborative Program in Pediatrics, Internal Medicine, and Family Medicine: Concussion Surveillance/Management Project." New Florida Initiative, 2010-2012; \$600,000. Person Months: 1.2

Purpose: The purpose of this research project is to establish a community-based concussion evaluation network for clinical and preventative research in concussion/mTBI, and to evaluate an office-based concussion assessment tool (SCAT-2) in establishing baseline and incident concussions in youth sports participants. (in no cost-extension)

Nelson, D.R., Bauer, R.M. (Project PI) & Schenkman, B. Promoting Community Engagement through the CTSI – Concussion Surveillance and Management Program (Administrative Supplement to UF-CTSI). National Center for Advancing Translational Sciences (NCATS UL1 RR029890-03S3, Annual direct costs: \$169,547; Total = \$339,093), 2011-2013. Person Months: 1.2

Purpose: The purpose of this research project is to establish a community-based concussion evaluation network for clinical and preventative research in concussion/mTBI, and to evaluate an office-based concussion assessment tool (SCAT-2) in establishing baseline and incident concussions in youth sports participants (in no cost extension)

Completed Research Support

- 2009 Funding Agency: American Psychological Association
Project Title: Temporobasal Sulcal Morphology
Project Type: Research Training Total Funding: \$1,000 Role: PI/Mentor
- 2009 Funding Agency: NIMH (subcontract to Butler Hospital)
Project Title: Controlled Trial of DBS for OCD
Project Type: Research Total Funding: \$13,535 Role: Co-I
- 2009 Funding Agency: Area Health Education Centers (AHEC) – FL Dept. of Health
Project Title: HEC Tobacco Training and Cessation Program
Project Type: Education and Training Total Funding: \$61,000 Role: PI
- 2008 Funding Agency: NIMH (subcontract to Butler Hospital)
Project Title: Controlled Trial of DBS for OCD
Project Type: Research Total Funding: \$13,162 Role: Co-I
- 2008 Funding Agency: American Psychological Foundation
Project Title: Diagnostic Utility of a multitask verbal fluency paradigm in frontal and temporal lobe epilepsy
Project Type: Research Training Total Funding: \$2,500 Role: PI/Mentor
- 2007 Funding Agency: NIMH (subcontract to Butler Hospital)
Project Title: Controlled Trial of DBS for OCD
Project Type: Research Total Funding: \$12,993 Role: Co-I
- 2006 Funding Agency: Health Resources and Services Administration (HRSA)
Project Title: Education and Training in Rural Behavioral Health
Project Type: Training Total Funding: \$96,135 Role: PI
- 2006 Funding Agency: Epilepsy Foundation of America
Project Title: Effects of Age and Surgery Site on Seizure Outcome
Project Type: Dissertation Fellowship Total Funding: \$3,000 Role: PI/Mentor
- 2005 Funding Agency: Health Resources and Services Administration (HRSA)
Project Title: Education and Training in Rural Behavioral Health
Project Type: Training Total Funding: \$167,341 Role: PI
- 2004 Funding Agency: American Psychological Association/MCG
Project Title: Thinking, Feeling, and Doing in Depression
Project Type: Research Total Funding: \$2,500 Role: PI
- 2004 Funding Agency: Health Resources and Services Administration (HRSA)
Project Title: Education and Training in Rural Behavioral Health
Project Type: Training Total Funding: \$164,438 Role: PI
- 2003 Funding Agency: National Institutes of Health
Project Title: Neuropsychology of Human spatial Cognition
Project Type: F32 Postdoctoral Fellowship Total Funding: \$41,608 Role: PI/Mentor
- 2003 Funding Agency: National Institutes of Health
Project Title: Hippocampal Involvement in Explicit and Implicit Memory
Project Type: NRSA Fellowship Total Funding: \$27,827 Role: PI/Mentor
- 2003 Funding Agency: Epilepsy Foundation of America
Project Title: Visuospatial Abilities in Temporal Lobe Epilepsy
Project Type: Research Training Total Funding: \$16,000 Role: PI/Mentor

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Dawn Bowers, Ph.D.	POSITION TITLE Professor, Clinical & Health Psychology		
eRA COMMONS USER NAME (credential, e.g., agency login) dbowers			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Emory University, Atlanta GA		1968-1970	Psychology
University of Florida, Gainesville FL	B.A.	08/1972	Psychology
University of Florida, Gainesville FL	M.S.	12/1974	Clinical Psych/Neuropsych
University of Florida, Gainesville FL	Ph.D.	12/1978	Clinical Psych/Neuropsych
University of Florida, Gainesville FL	Post-doc	12/1979	Behavioral Neurology

A. Personal Statement

I look forward to continuing as a mentor University of Florida T32 on aging entitled "Physical, Cognitive, and Mental Health in Social Context." I have mentored several accomplished trainees in this program, and I look forward to continuing my active participation. I am a university professor with longstanding research and clinical expertise in neurocognitive and emotional changes associated with age related neurologic disorders including Parkinson disease. I have been a funded researcher for many years, including two recently completed clinical trials, one for treatment of apathy using rTMS and another for treatment of "masked faces" in individuals with Parkinson disease. Current research focuses on emotion regulation and executive function in PD, psychophysiological signatures of motivated behavior in PD, and collaborative studies related to interactive effects of cognitive training and exercise. I am strongly committed to research training. In 1998, I transitioned my primary academic appointment in the Department of Neurology to the Department of Clinical and Health Psychology in order to play a greater role in predoctoral research training. At the same time, I maintained close collaborator research ties with neuroscience/neurology colleagues. I have a keen understanding of the mentoring process for aspiring clinical scientists and have served as a primary sponsor for 5 pre-doctoral NRSA recipients, 1 post-doctoral NRSA recipient, 1 post-doctoral minority supplement, and 1 K23 trainee who just obtained her first R01. I have additionally been a consultant/advisor to multiple post-doctoral and CDA-2 and K-applicants and also direct a clinical post-doctoral program focused on clinical neuropsychology training. My Cognitive Neuroscience Laboratory at the McKnight Brain Institute includes four doctoral students, who are using various tools (startle, pupillometry, ERP, computational modeling, TMS, advanced statistical approaches) to better understand mechanisms that underlie emotional and cognitive changes in older adults with dopaminergic depletion disorders. As such, I have experimental tools/approaches and statistical expertise that can help facilitate hypothesis-driven research. This, coupled with a rich network of Health Science Center collaborators, has served as a model for the interdisciplinary training for my trainees. I also coordinate the neuropsychology module of the one of the largest clinical research databases on movement disorders in the world, maintained by the Center for Movement Disorders and Neurorestoration. This Center was established over a decade ago by Drs. Michael Okun and Kelly Foote (co-directors), who had the vision to instantiate a prospective database, now with over 5500 patients, the majority of whom have been followed longitudinally.

B. Positions and Honors

Positions & Employment

1976-1977:	Teaching Fellow in Neurology, Boston University College of Medicine
1976-1977:	Internship, Clinical Psychology/Neuropsychology, Boston VAMC
1976-1977	Externship, Geriatric Neuropsychology, Framingham Heart Study, MA
1979	Post-doctoral Fellowship, Behavioral Neurology, UF College of Medicine
1980- 1998	Associate Professor in Neurology [Assistant 1980-85], UF College of Medicine
1984-1998	Neuropsychologist, State of Florida Memory Disorders Clinic
1998-	Professor of Clinical & Health Psychology [Associate 1998-2002]

1998- Director, Cognitive Neuroscience Laboratory, UF McKnight Brain Institute
 2006- Division Chief, Neuropsychology Area, Dept. Clinical & Health Psychology
 2006- UF Foundation Research Professor
 2012- Fellow, American Psychological Association, Division 40
 2013 Board certification in Clinical Neuropsychology, American Board of Professional Psychology

Other Experience & Professional Memberships

2013-17 Member, Merit Review Panel for Mental Health and Behavioral Sciences-B, BLRD and SCR&D; Department of Veterans Affairs
 2012- Member, NIH SBBIR 2013/01 ZRG1 ETTN-K (10) B – Small Business: Clinical Neurophysiology, Devices, Neuroprosthetics, and Biosensors 2012-
 2012 Member, Special Emphasis Panel, Clinical and Imaging Translations Study Section [ZRG1 DTCS Y(81)], 2012
 2009-11 Ad hoc Member, NIH Adult Psychopathology & Disorders of Aging Study Section
 2000- Editorial Boards, The Clinical Neuropsychologist, Journal of International Neuropsychological Society
 Membership American Psychological Association (Divisions 12 and 40), International Neuropsychology Society, American Academy of Neurology, Society for Neuroscience, Cognitive Neuroscience Society
 Journal Reviews: *Neuropsychologia*, *Lancet*, *Neurology*, *New England Journal of Medicine*, *Cortex*, *Movement Disorders*, *Journal of International Neuropsychological Society*, *The Clinical Neuropsychologist*, *J. Neurology*, *Neuropsychiatry*, & *Neurosurgery*, *Neuropsychology*, *Neuropsychologia*, *J. Cognitive Neuroscience*,

C. Selected Publications (out of 155)

(Students in italics)

1. **Bowers, D.**, Jones, J., Dietz, J. (2013, in press). Assessment of emotion, mood, and affect associated with neurologic disorders. In J. Synder, Nussbaum, Hamsher, K, and Parsons, M. (Eds). *Pocket Handbook of Neuropsychological Assessment*.
2. Dietz, J., Jones, J., Bradley, M., Okun, M.S., Perlstein, W., **Bowers, D.** (2013, in press). The late positive potential, emotion, and apathy in Parkinson's disease. *Neuropsychologia*.
3. Jordan, L., Zahodne, L., Okun, M.S., **Bowers, D.** (2013, in press). Hedonic and behavioral deficits associated with apathy in Parkinson's disease. *Movement Disorders*.
4. Dietz, J., Noecker, A., McIntyre, C.C., **Bowers, D.**, Foote, K., Okun, M.S. (2013, in press). Stimulation region within the GPI does not affect verbal fluency: Results from field modeling. *Brain Stimulation*. June 16 (epub ahead of print)
5. Zahodne, L.B., Marsiske, M.M., **Bowers, D.** (2013, in press). A latent class analysis of psychological disturbance in Parkinson disease. *International Journal of Geriatric Psychiatry*
6. Jones, J., Malaty, I., Price, C.C., Okun, M.S., **Bowers, D.** (2012). Health comorbidities and cognition in 1948 patients with idiopathic Parkinson disease. *Parkinsonism and Related Disorders*. 18(10), 1073-78.
7. Alexander, G., Ryan L., **Bowers, D.**, Foster, T., Bizon, T., Geldmacher D.S., Glisky, E. Characterizing cognitive aging in humans with links to animal models. (2012) *Frontiers in Aging Neuroscience*. 4, 21. doi: 10.3389/fnagi.2012.00021
8. Ferencz, B., Scholtissen, B., Bogorodskaya, M., Okun, M.S., **Bowers, D.** (2012) Toys and Gadgets: Construct validity of apathy in Parkinson Disease. *J. Neuropsychiatry and Clinical Neuroscience*, Sept 1: 24(4), 463-71.
9. Zahodne, L., Marsiske, M., Okun, M.S., Rodriguez, R., Malaty, I, **Bowers, D.** (2012) Mood and motor symptoms in Parkinson's Disease: a multivariate latent growth curve analysis. *Neuropsychology*, 26, 71-80.
10. Zahodne, L., Marsiske, M., Okun, M.S., and **Bowers, D.** (2012). Components of depression in Parkinson disease. *J. Geriatric Psychiatry & Neurology*. 25, 131-7] PMID:22859701

Role: Co-I

1R34MH080764, PI: Okun 08/31/2009 -09/01/2012

Scheduled and Responsive Brain Stimulation for the Treatment of Tourette Syndrome.

This clinical trial examines the effectiveness of a scheduled DBS protocol for treatment of symptoms in patients with intractable Tourettes syndrome.

Role: Co-I

R21-AG033284 Multiple PI:: Altman & Hass 8/2/2010-8/1/2012

Language and Executive function in Parkinson's disease: Effects of dual task and exercise.

This project examines the influence of aerobic exercise and multi-tasking on language processing in patients with Parkinson disease.

Role: Co-I

R01-NS50633 PI: Bowers 12/01/04-11/30/09

Masked Facies in Parkinson Disease: Mechanism and Treatment

In this study, we evaluated a behavioral treatment approach for improving facial expressivity in patients with parkinson's disease using a double-blind sham-controlled randomized clinical.

Role: PI

Michael J. Fox Foundation PI: Fernandez 10/31/2006-9/30/2009

Repetitive Transcranial Magnetic Stimulation for the Treatment of Apathy in Parkinson's Disease

The purpose of this study was to learn whether rTMS improved symptoms of apathy and depression in nondemented patients with idiopathic Parkinson disease. To do so, we conducted a double-blind placebo controlled randomized parallel group study.

Role: Co-PI

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Cohen, Ronald A.	POSITION TITLE Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) rcohen1			
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
Tulane University	BSc	06/76	Psychology
Louisiana State University	Ph.D.	08/82	Psychology
UCLA Medical Center: Neuropsychiatric Institute	Internship	07/82	Psychology
University of Florida	Fellowship	07/83	Neuropsychology

A. Personal Statement

The proposed T32 is for a multidisciplinary aging training program. The goal is to train young scholars in research aimed at identifying the antecedents of late life functional independence, and in intervention research approaches to the prevention of disability. The proposed T32 is closely aligned with my own research interest. I have recently joined the faculty of the **Aging** and McKnight Brain Institutes at the University of Florida and am the **director of a new Center for Cognitive Aging and Memory**. This center's research on cognitive aging integrates neurocognitive, neuroimaging, and laboratory biomarker approaches. Until this year, I have been a professor at Brown University, where I co-directed the Memory Disorders Program for a number of years. I have conducted clinical and cognitive neuroscience research and directed a clinical program aimed at the assessment of neurodegenerative diseases, including **Alzheimer's, Parkinson's and vascular dementia**. I have an extensive background in neuroimaging and the neuroscience of attention-executive function, and strong record of research involving the use of functional and structural neuroimaging methods in studies of age-associated brain disorders, and am in a position to provide strong support at various levels for the proposed MDNT. This background enables me to be an effective within the MDMT.

I have published over 170 peer-reviewed articles, and numerous book chapters on topics related to this project. Besides co-editing several books on topics related to areas of clinical neuropsychological research, I authored "Neuropsychology of Attention" in 1993 which was the first book on this topic in the field. I am currently completing a new book "Brain Imaging in Behavioral Medicine and Clinical Neuroscience", which will be the first to address the use of neuroimaging methods for studying various problems in behavioral medicine, including HIV infection. Over the past several years, I have published numerous papers on the neuropsychology of AD, vascular dementia, cardiovascular disease and HIV, including a number of recent studies involving the neuroimaging methods planned for this study. I am PI of an R01 aimed at studying HIV-aging interactions on brain structure and function and have conducted past R01 projects examining structural brain changes associated with vascular cognitive impairment secondary to CVD. My current R34 examines a cognitive training approach for remediation of executive-attention dysfunction associated with HIV, which of course is relevant to one of the goals of the T32. I am a co-PI on a number of NIH supported projects, and have a track record as a PI on past NIH supported projects as well. I have decades of research support to study attention, executive function and the brain.

I have a long-standing commitment to training promising junior investigators, which make me well-suited to serve as a mentor for this T32 program. To date I have served as a mentor on the career development K grants of three of our trainees from Brown University, and have also mentored 12 successful F32 projects over the past decade. Accordingly, I am in an excellent position to serve as a mentor to trainees in the MDNT, sharing my expertise through direct consultation, readings, and regular meetings aimed at facilitating their developing into independent investigators.v

B. Positions and Honors

1992-1993 Associate Professor of Neurology, Univ. Mass. Medical School

1993-1996	Assistant Professor, Psychiatry-Human Behavior, Brown University
1993-2008	Director, Neuropsychology: The Miriam Hospital, Providence, RI.
1996-2004	Associate Professor, Psychiatry-Human Behavior, Brown University
1998-Current	Editorial Boards: Journal of the International Neuropsychological Society; Brain Imaging and Behavior; The Clinical Neuropsychologist, Stroke, JCRP.
2002-2011	Permanent Member, NIH – BMIO Study Section
2002-Current	Member, Executive Committee, Brown University, Magnetic Resonance Foundation
2004-Current	Professor, Brain Sciences Program, Brown Univ.
2004-Current	Professor of Psychiatry and Human Behavior, Brown University
2008-2012	Director, Neuropsychological Research, The Miriam Hospital
2012-Current	Director, Center for Cognitive Aging and Memory, The University of Florida
2012-Current	Evelyn McKnight Endowed Professor, Departments of Neurology, Psychiatry and Aging, the University of Florida

C. Selected Peer-reviewed Publications (selected from 176 peer-reviewed publications)

Most relevant to the current application

1. Gunstad J, Paul RH, **Cohen RA**, Tate DF, Spitznagel MB, Gordon E. Elevated body mass index is associated with executive dysfunction in otherwise healthy adults. *Compr Psychiatry*. Jan-Feb 2007;48(1):57-61.
2. **Cohen RA**, Poppas A, Forman DE, Hoth KF, Haley AP, Gunstad J, Jefferson AL, Tate DF, Paul RH, Sweet LH, Ono M, Jerskey BA, Gerhard-Herman M. (2009). Vascular and cognitive functions associated with cardiovascular disease in the elderly. *J Clin Exp Neuropsychol*, 31:96-110. *PMC 2739675*
3. Jefferson AL, Holland CM, Tate DF, Guttmann, **Cohen RA**. Atlas-derived perfusion correlates of white matter hyperintensities in patients with reduced cardiac output. *Neurobiol Aging*. Mar 6 2009.
4. McCaffery JM, Haley AP, Sweet LH, **Cohen, RA** et al. (2009). Differential functional magnetic resonance imaging response to food pictures in successful weight-loss maintainers relative to normal-weight and obese controls. *Am J Clin Nutr*. 90(4):928-934. *PMC 2744621*.
5. **Cohen RA**, Harezlak J, Gongvatana A, et al. Cerebral metabolite abnormalities in human immunodeficiency virus are associated with cortical and subcortical volumes. *J Neurovirol*. Nov 2010;16(6):435-444.
6. **Cohen RA**, de la Monte S, Gongvatana A, et al. (2011). Plasma cytokine concentrations associated with HIV/hepatitis C coinfection are related to attention, executive and psychomotor functioning. *J Neuroimmunol*. Apr;233(1-2):204-210. *PMC 3074016*.
7. Okonkwo OC, **Cohen RA** Gunstad J, Tremont G, Alosco ML, Poppas A. (2010). Longitudinal trajectories of cognitive decline among older adults with cardiovascular disease *Cerebrovascular Disease*.30(4):362-373. *PMCID: PMC3014862*.
8. Gunstad J, Strain G, Devlin MJ, et al. (2011). Improved memory function 12 weeks after bariatric surgery. *Surg Obes Relat Dis*. Jul-Aug 7(4):465-472. *PMC 3117085*.
9. Ott BR, **Cohen RA**, Gongvatana A, et al. (2010). Brain ventricular volume and cerebrospinal fluid biomarkers of Alzheimer's disease. *J Alzheimers Dis*.20(2):647-657. *PMCID: PMC3078034*.
10. Spitznagel MB, Garcia S, Miller LA, et al. Cognitive function predicts weight loss after bariatric surgery. *Surg Obes Relat Dis*. Oct 29 2011.
11. Alosco ML, Spitznagel MB, van Dulmen M, Raz N, **Cohen R**, Gunstad J. The additive effects of type-2 diabetes on cognitive function in older adults with heart failure. *Cardiol Res Pract*. 2012; *PMID: 22701196*.
12. Galioto R, Spitznagel MB, Strain G, Devlin M, **Cohen R**, Paul R, Crosby RD, Mitchell JE, **Gunstad J**. Cognitive function in morbidly obese individuals with and without binge eating disorder. *Compr Psychiatry*. 2012 Jul;53(5):490-5.
13. Hassenstab JJ, Sweet LH, Del Parigi A, McCaffery JM, Haley AP, Demos KE, **Cohen RA**, Wing RR. Cortical thickness of the cognitive control network in obesity and successful weight loss maintenance: A preliminary MRI study. *Psychiatry Res*. 2012 Apr 30;202(1):77-9. Epub 2012 May 16. *PMID: 22595506*.
14. Sweet LH, Hassenstab JJ, McCaffery JM, Raynor HA, Bond DS, Demos KE, Haley AP, **Cohen RA**, Del Parigi A, Wing RR. Brain response to food stimulation in obese, normal weight, and successful weight loss maintainers. *Obesity (Silver Spring)*. 2012 May 9. Epub ahead of print] *PMID: 22569002*.

15. Miller, L., Crosby, R., Galioto, R., Strain, G., Devlin, M., Wing, R., **Cohen, R.** Mitchell, J., & Gunstad, J. (in press). Bariatric surgery patients exhibit improved memory function 12 months post-operatively. *Obesity*.

D. Research Support

Ongoing Research Support

5 R01 MH074368-05 (Ronald Cohen, PI) 09/30/06–08/31/13
“Age Effects on HIV-Associated Brain Dysfunction” NCE
The goal of this project is to achieve greater understanding of how HIV infection interacts with aging to cause brain abnormalities that affect neurocognitive functioning. Dr. Cohen oversees this entire project.
Role: Principal Investigator

5 R01 HL089311-04 (John Gunstad, PI) 09/15/08-11/30/12
NHLBI/Subcontract from Kent State
“Cognitive Benefits of Cardiac Rehabilitation in Heart Failure”
The main goal of this project will be to study CVD and its effects on the brain, and particularly how cardiac rehabilitation and the effects of vascular conditioning are influenced by the vascular CVD and systemic vascular disease factors.
Role: Principal Investigator of Subcontract

5U01 CA1503878-03 (Rena Wing, PI) 09/28/09-08/31/14
“Increasing Sleep Duration: A Novel Approach to Weight Control”
The purpose of the project is to translate the basic science on sleep duration into a novel intervention to reduce obesity and obesity-related co-morbidities.
Role: Co-Investigator

5 R34 DA031057-02 (Ron Cohen, PI) 09/30/10-08/31/13
“Improving Adherence and Cognition in Substance-Using HIV Patients”
Substance abuse in the context of HIV infection is a major problem that affects clinical outcome and interferes with adherence to treatment regimens. This study examines the value of a computer-based cognitive training program (Vigorous Mind) to enhance attention and executive functioning as a means of improving organizational and planning ability and ultimately treatment adherence. The study focuses on further development of the program for use in this population and initial testing to determine its acceptability and whether a larger scale clinical trial is warranted.
Role: Principal Investigator

5 P01 AA019072-02 (Peter Monti, PI) 09/30/10-08/31/15
“Alcohol and HIV: Biobehavioral Interactions and Intervention”
This study focuses on the interactive effects of HIV and alcohol use on metabolic-vascular disturbances underlying brain dysfunction.
Role: Principal Investigator of Substudy

Completed Research Support

5 R01 NS036524-10 (Brad Navia, PI) 05/23/05-04/30/10
NINDS/Subcontract from Tufts University
“Proton MRS Studies of Cerebral Injury in HIV Infection”
The major goals of this project are to examine the MRS and MRI correlates of cognitive function in the context of antiretroviral therapy
Role: PI of Subcontract

3 R01 NS036524-07S1 (Brad Navia, PI) 07/01/06-04/30/10
NINDS/Subcontract from Tufts University
“Brain Morphometric Studies of Cerebral Injury in HIV Infection”

(Supplement to “Proton MRS Studies of Cerebral Injury in HIV Infection”)

Role: Principal Investigator of Subcontract

5 P50 CA084719-11 (Jeanne McCaffery, PI of sub)

09/30/99-07/31/10

NCI/Subcontract from Butler Hospital

“Nicotine Dependence: Phenotype, Endophenotype & Contexts”

The major goal is to characterize the relationship of cigarette smoking to fMRI responses on smoking related tasks. Dr. Cohen’s role is to provide expertise related to the functional imaging analyses and interpretation of data from these paradigms.

Role: Co-Investigator

5 R01 HL084178-03 (Lawrence Sweet, PI)

01/25/07-11/30/11

NHLBI/Subcontract from Butler Hospital

“Hemodynamic and Cognitive Function in Cardiovascular Disease”

This study aims at characterizing the relationship between cerebral hypoperfusion and abnormalities of BOLD on FMRI in association with working memory and attention performance among patients with heart failure.

Role: Principal Investigator of Subcontract

5 R01 DA020725-03 (Tara White, PI)

10/01/07-05/31/11

NIDA/Subcontract from Brown University

“Imaging Individual Differences in Amphetamine Effects”

This study examines the relationship between personality factors and response to risk and reward following intake of amphetamines.

Role: Principal Investigator of Subcontract

2 R56 DK075119-05A1 (John Gunstad, PI)

09/01/06-08/31/12

NIDDK/Subcontract from Kent State

“Extended Effects of Bariatric Surgery on Cognitive Function”

This study examines the effects obesity and rapid loss of weight associated bariatric surgery.

Role: Principal Investigator of Subcontract

BIOGRAPHICAL SKETCH

NAME Robert Lewis Cook		POSITION TITLE Associate Professor of Epidemiology and Medicine	
eRA COMMONS USER NAME cookrl			
EDUCATION/TRAINING			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
University of North Carolina at Chapel Hill, NC	BSPH	1982-86	Biostatistics
University of North Carolina at Chapel Hill, NC	MD, MPH	1986-91	Epidemiology
University of Virginia, Charlottesville, VA	Residency	1994-96	Internal Medicine
University of North Carolina at Chapel Hill, NC	Residency	1994-96	Preventive Medicine
University of North Carolina at Chapel Hill, NC	Fellowship	1994-96	RWJ Clinical Scholars

A. PERSONAL STATEMENT

I am an Associate Professor of Epidemiology and Medicine at the University of Florida in Gainesville. As a clinical epidemiologist, I am most interested in identifying strategies that can improve health outcomes in persons with HIV infection. For over a decade, the association of alcohol and drugs to clinical and behavioral outcomes in HIV infection has been my major focus. I am PI of an NIH-funded study to conduct a randomized clinical trial of a pharmacologic intervention (oral naltrexone) for harmful alcohol consumption among women with HIV infection. In addition, I continue to be a primary care physician in an outpatient medical clinic, and have built new research collaborations with clinicians and health services researchers. I am the primary mentor (doctoral dissertation chair) for 5 current students obtaining a PhD in epidemiology, and two junior faculty members. I am building a stronger collaboration with aging. This year, I will be co-mentoring a student in clinical health psychology with Dr. Ron Cohen, who is a leader in aging research. I am the chair of the dissertation committee for a student whose focus is on aging, and my two newest PhD students in epidemiology plan to focus on chronic disease outcomes associated with aging related to HIV. In my own research, I am a co-investigator on an NIH-funded grant related to immune senescence and aging, and our Southern HIV Alcohol Research Center has neurocognitive dysfunction associated with aging as one of its main goals, and Dr. Catherine Price is a collaborator. I look forward to being part of the team and supporting the overall mission of the T32; Physical, Cognitive and Mental Health in Social Context.

B. POSITIONS AND HONORS

Positions and Employment

1994-1996	Clinical Instructor, University of North Carolina, Chapel Hill, NC.
1996-2006	Assistant Professor, Department of Medicine, Division of General Internal Medicine, University of Pittsburgh, Pittsburgh, PA.
1997-2006	Assistant Professor, Department of Community and Behavioral Health Sciences, Graduate School of Public Health, University of Pittsburgh, Pittsburgh, PA
2006	Associate Professor, Department of Medicine, University of Pittsburgh, Pittsburgh, PA
2007-present	Associate Professor with Tenure. Department of Epidemiology, University of Florida, Gainesville FL.
2007-present	Associate Professor, College of Medicine, University of Florida, Gainesville FL
2007-present	Associate Director, Florida Center for Medicaid and the Uninsured, University of Florida

2010-2012 Director, PhD Program in Epidemiology, University of Florida
2012-present Director, Southern HIV & Alcohol Research Consortium (SHARC), University of Florida, Gainesville, FL.

Professional Societies

1993-present Member, Society of General Internal Medicine
1996-present Member, American Sexually Transmitted Disease Association
2007-present Member, American Public Health Association, Florida Public Health Association
2009-present Member, Society of Epidemiologic Research

Awards/Professional Activities

1989-90 Delta Omega Undergraduate Award of Excellence, University of NC
1989-91 Holderness Medical Research Fellowship, University of NC School of Medicine.
1990 Cecil G. Sheps Award in Social Medicine, University of NC School of Medicine.
1999-2006 Co-Director, Bridging the Gaps Community Health Internship
2010 Delta Omega, Honorary Society of Public Health
2010 University of Florida College of Medicine Excellence in Teaching Award
2013-2016 UF Research Foundation (UFRF) Professor

C. Selected Peer-reviewed PUBLICATIONS (Selected from 67 peer-reviewed publications)

Most relevant to current application

1. **Cook RL**, Zhu F, Belnap BH, Weber, KM, Cole SR, Vlahov D, Cook JA, Hessol NA, Wilson TE, Plankey M, Howard, AA, Sharp GB, Richardson JL, Cohen MH. Long-term trajectories of alcohol consumption in adult women with and without HIV infection. *AIDS and Behavior*, published online July 27, 2012). PMID: 22836592.
2. **Cook RL**, Zhu F, Belnap BH, Weber K, Cook JA, Vlahov D, Wilson TE, Hessol NA, Plankey M, Howard AA, Cole SR, Sharp GB, Richardson JL, Cohen MH. Longitudinal trends in hazardous alcohol consumption in women with HIV infection: 1995-2006. *American Journal of Epidemiology* 2009;169(8):1025-32. PMID: 19270052.
3. Cook JA, Burke-Miller JK, Cohen MH, **Cook RL**, Vlahov D, Wilson TE, Golub ET, Schwartz RM, Howard AA, Ponath C, Plankey MW, Grey DD. Crack cocaine, disease progression, and mortality in a multi-center cohort of HIV-1 positive women. *AIDS* 2008, 22(11), 1355–1363. PMID: 18580615
4. **Cook RL**, Østergaard, L, Hillier SL, Murray PJ, Chang CH, Comer DM, Ness RB for the DAISY study team. Home screening for sexually transmitted diseases in high-risk young women: randomized controlled trial. *Sex Transm Infect* 2007 Jul;83(4):286-91 PMID: 17301105
5. **Cook RL**, McGinnis KA, Kraemer KL, Gordon AJ, Conigliaro J, Maisto SA, Samet JH, Crystal S, Rimland D, Bryant KJ, Braithwaite RS, Justice AC. Intoxication before intercourse and risky sexual behavior in male veterans with and without HIV infection. *Medical Care* 2006; 44(8 suppl 2):(S31-S36). PMID: 16849966

Additional recent publications of importance to the field

6. Harman JS, Rost KM, Harle CA, **Cook RL**. Association of electronic medical record availability and depression treatment during primary care office visits by older patients. *J Gen Intern Med* 2012 Feb 4. [Epub ahead of print] PMID:22311334
7. Akrim, M, Lemrabet S, Elharti E, Gray R, Tardy JC, **Cook, RL**, Salemi M, Andre P, El Aouad R. HIV-1 Molecular epidemiology in Morocco from the sentinel surveillance survey data 2004-2005. *AIDS Res Ther* 2012, Feb 14;9(1):5. PMID 22333070
8. Bass M, Korthuis PT, Cofrancesco J, Berkenblit GV, Sullivan LE, Asch SM, Bashook PG, Edison M, Sosman JM, **Cook RL**. Provider and practice characteristics associated with use of rapid HIV testing by general internists. *J Gen Intern Med* 2011, June 28, epub ahead of publication. PMID: 21710314.
9. Buhi ER, **Cook RL**, Marhefka SL, Blunt HD, Wheldon C, Oberne AB, Mullins JC, Dagne GA. Does the Internet represent a sexual health risk environment for young people? *Sex Transm Dis*, 2012, 39(1), 55-58. PMID: 22183848.

10. **Cook RL**, McGinnis KA, Samet JH, Fiellin DA, Rodriguez-Barradas MC, Kraemer KL, Gibert CL, Braithwaite RS, Goulet JL, Mattocks K, Crystal S, Gordon AH, Oursler KA, Justice AC. Erectile dysfunction drug receipt, risky sexual behavior and sexually transmitted diseases (STDs) in men with and without HIV infection. J Gen Intern Med. 2010 Feb;25(2):115-21. Epub 2009 Nov 18. PMID: 19921112
11. **Cook RL**, Zhang J, Mullins J, Kauf T, Brumback B, Steingraber H, Mallison C. Factors associated with initiation and completion of HPV vaccine series among young women enrolled in Medicaid. 2010, Journal of Adolescent Health, 2010 Dec;47(6):596-9.PMID: 21094437.
12. **Cook RL**, Downs JS, Marrazzo JM, Switzer GE, Tanriover O, Wiesenfeld HC, Murray PJ, Hillier SL. Preferred characteristics of vaginal microbicides in women with bacterial vaginosis. J Women's Health 2009 Jul 24. [Epub ahead of print]. PMID: 19630538.
13. Ostrow D, Silverman M, **Cook RL**, Johnson L, Jacobsen L, Li X, Chmiel J. Prospective study of attitudinal and relationship predictors of sexual risk in the Multicenter AIDS Cohort Study. AIDS & Behavior, 2008; 12:127-138. PMID: 17410419.
14. Cook JA, Grey DD, Burke-Miller JK, Cohen MK, Vlahov D, Kapadia F, Wilson TE, **Cook RL**, Schwartz R, Golub E, Anastos K, Ponath C, Goparaju L, Levine A. Illicit drug use, depression and their association with highly active antiretroviral therapy in HIV-positive women. Drug and Alcohol Dependence 2007; 89(1):74-81. PMID: 17291696
15. **Cook RL**, Comer DM, Wiesenfeld HC, Chang CH, Tarter R, Lave JR, Clark DB. Alcohol and drug use and related disorders: an under recognized health issue among adolescents and young adults attending STD clinics. Sex Transm Dis. 2006 ;33(9):565-70. PMID: 1657204.

D. RESEARCH SUPPORT

Ongoing Research Support

Miami Women's Interagency HIV Study (WIHS)

Role: Co-investigator (Fischl PI)
 Funding: NIAID
 Period: 2013-2018

The Miami Women's Interagency HIV Study is part of the national WIHS Cohort, which seeks to study long-term outcomes of HIV infection in women. As part of the Miami site, Dr. Cook will be involved with the behavioral working group and will study other long-term outcomes in HIV.

Southern HIV & Alcohol Research Consortium (SHARC)

Role: Principal Investigator
 Funding: NIAAA U24 AA022002
 Period: 2012 – 2017

The mission of the SHARC is to improve health outcomes and reduce HIV transmission among the diverse range of populations affected by alcohol and HIV infection in the Southeastern United States.

Pharmacotherapy for alcohol consumption in HIV-infected women: Randomized trial

Role: Principal Investigator
 Funding: National Institute of Alcohol Abuse and Alcoholism 1 U01 AA020797-01
 Period: September 25, 2011 – September 24, 2016

This study is a double-blind randomized clinical trial to determine the efficacy of the medication naltrexone to reduce alcohol consumption and complications in women with HIV.

Immune Dys-regulation in HIV-infected Women with Heavy Alcohol Consumption

Role: Co-investigator (Desai PI)
 Funding: National Institute of Alcohol Abuse and Alcoholism 1U01AA020800-01

Period: 09/10/11 – 08/31/16

The major goal of this project is to examine whether chronic cumulative alcohol exposure is associated with more rapid CD4 T cell decline and immune dys-functionality (microbial translocation, immune activation, inflammation and immune senescence) leading to early advent of AIDS and non AIDS co-morbidities

Rural South Public Health Training Center

Role: Co-investigator (Peoples-Sheps PI)

Funding: HRSA

1UB6HP2282

Period: 2011-2015

The Rural South Public Health Training Center seeks to expand training of public health professionals and to support community public health, with a focus on HIV infection and a focus on rural areas in Florida. Dr. Cook is involved in the center by co-teaching a course on HIV/AIDS, participating in supervision of interns and internship projects, and helping to evaluate the program.

Completed Research Support (most relevant to current submission)

Molecular epidemiology and anthropological determinants of HIV-1 emerging epidemic in Southern Morocco

Role: Co-PI

Funding: University of Florida Center for AIDS Research and Emerging Pathogens Institute

Period: January 1, 2009 – December 21, 2009

The objective of this study was to obtain phylogenetic sequences from HIV samples across Morocco and link them with some risk behavior information that had been previously collected. We used funding from this project to support the preliminary analysis that has now resulted in two submitted papers.

Home Screening for Bacterial Vaginosis to Prevent STD: A study of the Sexually Transmitted Infections Clinical Trials Group

Role: Designed study protocol, Co-Investigator

Funding: National Institute of Allergy and Infectious Diseases NIAID HHSN266200400074C

Period: Jan 1, 2007-Dec 31, 2011

This study is a randomized controlled trial designed to determine whether regular screening and treatment of bacterial Vaginosis will reduce the risk of incident chlamydial and gonorrhea infections. We will recruit 1500 young women from 6 US cities. Subjects will obtain self-collected vaginal swabs and send them in every two months. Dr. Cook designed the protocol and for study, which began recruitment in the May, 2008.

Quadravalent HPV vaccination and oral HPV infection in college women

Role: PI

Funding: Merck, Inc.

Period: 2010-2012

This study sought to determine the prevalence of oral HPV and associated risk factors in a sample of 1000 college women.

BIOGRAPHICAL SKETCH

NAME Thomas Foster		POSITION TITLE Professor of Neuroscience	
eRA COMMONS USER NAME (credential, e.g., agency login) Tom_Foster			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
University of Arizona, Tucson AZ	BS	1981	Psychology
Bowman Gray, School of Medicine, W-S, NC	PhD	1987	Physio/Pharm
University of Colorado, Boulder CO	Postdoctoral	1991	Neurophysiology and behavior

A. Personal Statement

I am pleased to continue as a mentor on our aging T32. I am the chair of one graduated trainee, and aging research is the major focus of my work. **Impaired memory is the primary cognitive deficit associated with aging and Alzheimer's disease** and, with the increasing number of older individuals; this problem will impact a significant proportion of Americans. My research focuses on understanding brain mechanisms for modifying synaptic transmission and their relationship to memory, particularly in the context of cognitive decline during aging. My long-term goal is the amelioration of memory deficits associated with aging and Alzheimer's disease. My research program utilizes a combination of behavioral characterization with biochemical, molecular, and electrophysiological techniques to obtain a vertically integrated perspective on neural aging, from the molecular to the cognitive level. Therefore, the graduated students I train are exposed to a number of different techniques, while they acquire skills and techniques focused on their research question. I have been continuously funded through NIH as a principle investigator for the past 17 years. During this time I have also been a sponsor for students on training grants including NRSA Training grants to Ted Dumas 1996-1997, Nick Waters. 1996-1997, Heather Fugger 1998-2000, foundation grants and awards including Glenn Foundation/AFAR Predoctoral training grant to Chris Norris 1997, Women in Neuroscience 1997 Travel Award to Heather Fugger 1997. I have been a preceptor for training grants: NIA T32 (Meyer PI, Scarpace Co-PI) Training in Neurobiology of Aging. 5/1/06 to 4/30/11; NIH Training in Molecular and Cellular Basis of Brain Aging (Phyllis Wise PI) 5/1/99 to 4/30/04 and I have sponsored students supported by training grants including **NIA Training Grant award to Kristina Aenlle 2006**, and Neurobiology of Aging Training Grant award to Travis Jackson 2008. The work supported by these training awards has resulted in primary authorship papers for my students in top tier journals. Finally, my students have gone on to continue research at universities and in industry

B. Position and Honors

1. Positions and Employment

Assistant Professor, 1991-1992 Dept. Psych. University of Connecticut
Assistant Professor, 1992-1998, Dept. Psych. University of Virginia
Associate Professor, 1998-2003, Dept. Pharmacology, University of Kentucky Medical School
Associate Professor, 2003-2006, Dept Neurosci, University of Florida
Professor 2006-present, Dept Neurosci, University of Florida

2. Academic Honors and Awards

McKnight Endowed Chair for Research on Aging and Memory, University of Florida 2003-present
Member of the planning Committee for the Cognitive Aging Summit I & II 2006-present
Associate Editor Frontiers in Aging Neuroscience 2009-present
Member for > 10 NIH Special Emphasis Review Panels (2001-2009)

Reviewer for The Lottery Health Project Grants, New Zealand, 2008
Member, NIH IFCN-7 Study Section 1999-2004
Shannon Investigators Award, 1992

C. Selected Peer-reviewed Publications (Only 15, most imperative/relevant to grant)
The bolded names are predoctoral students that I have trained.

1. **Guidi**, M. and Foster, T.C. (2012) Animal model of memory and cognitive disorders. In F.H. Kobeissy (Ed.) *Psychiatric disorders: Methods and Protocols*, Volume 829: 145-153. *Methods in Molecular Biology* Springer, USA (Humana Press, Inc), PMID: 22231811.
2. **Lee**, W-H. Kumar, A., Rani, A., Herrera, J. and Foster, T.C. (2011) Influence of viral vector-mediated delivery of superoxide dismutase and catalase to the hippocampus on spatial learning and memory over the course of aging, *Antioxidants & Redox Signaling*, 16 (4): 339-50 PMID: 21942371
3. **Bodhinathan**, K., Kumar, A., and Foster, T.C. (2010) Intracellular redox state alters NMDA receptor response during aging through Ca²⁺/Calmodulin-dependent protein kinase II, *Journal of Neuroscience* 30: 1914-1924.
4. **Jackson**, T.C., Rani, A., Kumar, A., and Foster, T.C. (2009) Regional hippocampal differences in AKT survival signaling across the lifespan: implications for CA1 vulnerability with aging. *Cell Death and Differentiation*, 16: 439-448.
5. **Jackson**, T.C. and Foster, T.C. (2009) Regional health and function in the hippocampus: Evolutionary compromises for a critical brain region. *Bioscience Hypotheses*, 2 245-251.
6. **Aenlle**, K.K, Kumar, A., Cui, L., Jackson, T.C. and Foster, T.C. (2009) Effects of cyclic estrogen treatment on cognition and transcription in the hippocampus of middle-aged mice. *Neurobiology of Aging*, 30: 932-945.
7. **Aenlle**, K., and Foster, T.C. (2009) Aging alters the expression of genes for neuroprotection and synaptic function following acute estradiol treatment. *Hippocampus* in press.
8. **Sharrow**, K.M., Kumar, A., and Foster, T.C. (2002) Calcineurin as a potential contributor in estradiol regulation of hippocampal synaptic function. *Neuroscience* 113: 89-97.
9. **Fugger**, H.N. Kumar, A. Lubahn, D.B., Korach, K.S. and Foster, T.C. (2001) Examination of estradiol effects on the rapid estradiol mediated increase in hippocampal synaptic transmission in estrogen receptor α knockout mice. *Neuroscience Letters* 309: 207-209.
10. **Fugger**, H.N., Foster, T.C., Gustafsson, J.-A. and Rissman, E.F. (2000) Novel effects of estradiol and estrogen receptor α and β on performance on cognitive function. *Brain Research* 883:258-264.
11. **Fugger**, H.N., Cunningham, S.G. Rissman, E.F., and Foster, T.C. (1998) Sex differences in the activational effect of ER α on spatial learning. *Hormones and Behavior*, 34: 163-170.
12. **Norris**, C. M. and Foster, T.C. (1999) MK-801 improves retention in aged rats: Implications for altered neural plasticity in age-related memory deficits. *Neurobiology of Learning and Memory*, 71: 194-206.
13. **Norris**, C. M., Halpain, S. and Foster T. C. (1998) Reversal of age-related alterations in synaptic plasticity by blockade of L-type Ca²⁺ channels. *Journal of Neurosciences* 18: 3171-3179.
14. **Dumas**, T.C. and Foster, T.C. (1998) GABA_B receptors differentially regulate hippocampal CA1

excitatory synaptic transmission across postnatal development. Neuroscience Letters, 248: 138-140.

15. **Norris**, C.M., Korol, D.L. and Foster, T.C. (1996) Increased susceptibility to induction of long-term depression and long-term potentiation reversal during aging. Journal of Neuroscience 16: 5382-5392.

D. Research Support

Ongoing Research Support

R01 AG14979 Foster (PI) 6/01/07 to 5/31/12

The major goals of this project are to examine the hypothesis that age-related changes in regulation of Ca^{2+} homeostasis mediate memory deficits and changes in synaptic plasticity.

OVERLAP None

Role: PI

R01 MH59891 Foster (PI) 03/16/04 to 03/15/10

Examines the hypothesis that estrogen exerts its effects on memory function and in delaying brain aging through regulation transcription via the α -estrogen receptor (This project is under a no cost extension).

OVERLAP None

Role: PI

As Preceptor

NIA T32 (Scarpace PI) Training in Neurobiology of Aging. 5/1/06 to 4/30/11.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Christopher J Hass	POSITION TITLE Associate Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) CHASS9			
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
Furman University, Greenville, SC	BS	1996	Biology
University of Florida, Gainesville, FL	M.S.	1998	Exercise Physiology
University of Florida, Gainesville, FL	Ph.D.	2001	Biomechanics
Emory University, Atlanta, GA	Post Doc	2004	Neurology

A. Personal Statement (not required)

I am pleased to join the T32 mentor corps for our predoctoral program in aging. I am an associate professor in the Department of Applied Physiology and Kinesiology at the University of Florida. Prior to joining the UF faculty, I held academic positions at Columbia University and Georgia Institute of Technology. Currently, I conduct research and teaches in the areas of biomechanics and motor control.

My research is funded by grants from the National Institutes of Health and Autism Speaks. I also collaborate on funded projects from the Michael J. Fox Foundation and Department of Veterans Affairs. I am an executive board member of the Biomechanics Interest Group within the American College of Sports Medicine and I serve as an external reviewer for numerous scientific journals.

My research interests include (1) Interactions between musculoskeletal biomechanics and sensorimotor control of lower extremity function with particular emphasis on the coordination of locomotion and balance; (2) The **efficacy of intervention programs** for improving quality of life, neuromechanical control, and disease progression in aging and Parkinson's disease; and (3) Dynamic stability during locomotor transitions in the **elderly and PD**.

B. Positions and Honors.

Positions and Employment

1997-1998 Research Assistant, Center for Exercise Science, University of Florida, Gainesville, FL

1998-2001 Teaching Assistant, Anatomy Laboratory, University of Florida, Gainesville, FL

1999-2000 Instructor, Department of Exercise and Sports Sciences, University of Florida, Gainesville, FL

2000-2001 Research Assistant, Biomechanics Laboratory, University of Florida, Gainesville, FL

2001-2004 Postdoctoral Fellow, Department of Neurology, Emory University, Atlanta, GA

2002-2004 Research Scientist II, School of Applied Physiology, Georgia Institute of Technology, Atlanta, GA

2004- 2006 Assistant Professor, Department of Biobehavioral Sciences, Teachers College Columbia University, New York, NY

2006-2010 Assistant Professor, Department of Applied Physiology and Kinesiology, Movement Disorders Center, McKnight Brain Institute, University of Florida, Gainesville, FL

2010 Associate Professor, Department of Applied Physiology and Kinesiology, Center for Movement Disorders and Neurorestoration, University of Florida, Gainesville, FL

Professional Memberships

1996- American College of Sports Medicine

2001- American Society of Biomechanics

2010-Parkinson's Study Group, Functional Neurosurgical

2012-Society for Neuroscience

Honors

1998 Phi Kappa Phi Honor Society
1999-2001 Grinter Fellow, University of Florida Graduate School
2010- Fellow Status, American College of Sports Medicine.
2011 Outstanding Young Alumnus, University of Florida
2012 University of Florida Research Foundation Professorship
2013 Postdoctoral mentoring award, University of Florida

b. Selected Peer-reviewed Publications(15 out of 66 total articles)

10 Most relevant to the current applications

1. Roemmich, R.T. J. R Nocera, S. Vallabhajosula, S. Amano, K.M. Naugle, E. L. Stegemöller, C. J. Hass. Spatiotemporal variability during gait initiation in Parkinson's disease Gait and Posture. Gait Posture, in press.
2. Hass, C.J., T.A. Buckley, C. Pitsikoulis, E. Barthelemy. Progressive Resistance Training improves Gait Initiation in Individuals with Parkinson's Disease. GaitPosture, in press. Available online at: <http://www.ncbi.nlm.nih.gov/pubmed/22266107>
3. Naugle, K.M., C.J. Hass, D. Bowers C.M. Janelle. Emotional state affects gait initiation in individuals with Parkinson's disease. Cogn Affect Behav Neurosci.;12(1):207-19, 2012
4. Price C.C., C. Favilla, J. J. Tanner, S. Towler, C.E. Jacobson, C.J. Hass, K. D. Foote, M.S. Okun. Lateral ventricle volume is poor predictor of post unilateral DBS motor change for Parkinson's disease. Parkinsonism Relat Disord. Jun;17(5):343-7, 2011
5. Nocera, J.R. **C. Price**, H. H. Fernandez, S. Amano, S. Vallabhajosula, M.S. Okun, N. Hwynn, C.J. Hass. Tests of Dorsolateral Frontal Function Correlate with Objective Tests of Postural Stability in Early to Moderate Stage Parkinson's Disease. Parkinsonism Relat Disord. Nov;16(9):590-4, 2010.
6. Nocera, J. R., L. J. Altmann, C. Sapienza, M. S. Okun & C. J. Hass. Can exercise improve language and cognition in Parkinson's disease? A case report. Neurocase. April 12:1-6, 2010.
7. Nocera, J. R., T. Buckley, D. Waddell, M. S. Okun & C. J. Hass. Knee extensor strength, dynamic stability, and functional ambulation: are they related in Parkinson's disease? Arch Phys Med Rehabil. 91: 589-95, 2010.
8. Kirsch-Darrow, L., L. B. Zahodne, C. Hass, A. Mikos, M. S. Okun, H. H. Fernandez & D. Bowers. How cautious should we be when assessing apathy with the Unified Parkinson's Disease Rating Scale? Mov Disord. 24: 684-8, 2009
9. Stewart, K. C., H. H. Fernandez, M. S. Okun, C. E. Jacobson & C. J. Hass. Distribution of motor impairment influences quality of life in Parkinson's disease. Mov Disord. 23: 1466-8, 2008.
10. Alberts, J. L., C. J. Hass, J. L. Vitek & M. S. Okun. Are two leads always better than one: An emerging case for unilateral subthalamic deep brain stimulation in Parkinson's disease. Exp Neurol, 214(1): 1-5, 2008.

5 Recent

1. Stegemöller, E., T. Buckley, C. Pitsikoulis, E. Barthelemy, R. Roemmich, C. J. Hass. Postural instability and gait impairment during obstacle crossing in Parkinson's disease. Arch Phys Med Rehabil. In press. Available online: <http://www.ncbi.nlm.nih.gov/pubmed/22318131>
 2. Gao J, J. Hu, T. Buckley T, K.White, C. Hass. Shannon and renyi entropies to classify effects of mild traumatic brain injury on postural sway. PLoS One.;6(9):e24446, 2011
 3. Dalton, E., M.D. Tillman, M.D. Bishop, C.J. Hass. Simple change in initial standing position enhances the initiation of gait. Med Sci Sports Exer. Dec;43(12):2352-8, 2011.
 4. Shemisa K, **C. J. Hass**, K. D. Foote, M.S. Okun, S.S. Wu, C.E. Jacobson CE, Y. Dai, G. Oyama, H.H. Fernandez. Unilateral deep brain stimulation surgery in Parkinson's disease improves ipsilateral symptoms regardless of laterality. Parkinsonism Relat Disord. Dec;17(10):745-8, 2011
 5. Hwynn N, C. J. Hass, P. Zeilman, J. Romrell, Y.Dai, S.S. Wu, K. D. Foote, S. H. Subramony, G. Oyama, F. Velez-Lago, H. H. Fernandez, A.S. Resnick, I. A. Malaty, M.S. Okun. Steady or not following thalamic deep brain stimulation for essential tremor. J Neurol. 258(9):1643-8, Sept 2011
-

C. Research Support Current and Completed

1. Sonke, J., *DANCE FOR LIFE*: Assessing the Effects of Dance on Motor and Non-Motor Function in Parkinson's Disease

Parkinson Research Foundation 4/1/2012-9/30/2013. \$33,600

Role: Investigator

The goal of this project is to evaluate the efficacy of a dance interventions to offset motor and nonmotor disturbances in individuals with Parkinson's disease.

2. Nocera, J. ALTER Function- Asymmetric Locomotor Training in the Elderly to Restore Function.

Claude D. Pepper OAIC, University of Florida 4/1/2012-3/31/2014 \$116,432

Role: Co-Investigator

The goal of this project is to evaluate the efficacy of split-belt treadmill training on mobility in older adults at risk for mobility disability.

3. White, K. Nonlinear Dynamics Used to Classify Effects of Mild Traumatic Brain Injury.

Army Research Office 9/15/2010-6/14/2011. \$49,999

Role: Co-PI

The goal of this project is determine the most sensitive measures of postural control utilizing both traditional and nonlinear analyses of postural sway. This project builds on our findings of grant 4 listed below.

4. Fregly, B. Treatment planning for gait pathologies on whole body angular and linear momentum.

National Science Foundation, 8/15/2010-8/14/2012, \$116,841

Role: Investigator

The goal of this project is to evaluate the predictability of gait rehabilitation using momentum analyses.

5. **Hass, CJ** and L. Altmann. Language and Executive Function in Parkinson's disease: Effects of dual task and exercise.

1R21AG033284-01A2 07/15/2010 – 06/30/2012 \$336, 489

Role: PI

The goal of this project is to evaluate the efficacy of motor interventions to offset motor and nonmotor disturbances in individuals with Parkinson's disease.

6. White, K. Classifying Effects of Mild Traumatic Brain Injury on Postural Sway with Nonlinear Dynamics.

Army Research Office, Summer 2009, \$132,368

Role: Co-PI

The goal of this project was to determine the sensitivity and specificity of nonlinear measures to evaluate and predict postural performance in individuals with and without mild traumatic brain injury.

7. **Hass, CJ.** Motor Control in young children with autism

Autism Speaks Pilot Grant, 8/07-07/09 \$117,747

Role: PI

The goal of this project was to evaluate static and dynamic postural control and gait function in children with autism spectrum disorders compared to typically developing children.

8. **Hass, CJ.** Tai Chi and dual task interference on postural control in Parkinson's disease.

5R03HD054594-02 9/1/2007-8/31/2009, \$146,500

Role: PI

The goal of this study was to evaluate the efficacy of tai chi as an intervention to reduce dual task performance decrement in individuals with Parkinson's disease during balance and locomotor tasks.

9. Alberts, JA and Richards, LG. Deep brain stimulation and motor function in Parkinson's disease patients. Department of Veterans Affairs, Center-to-Center Collaborative Research Grant, 11-1-06 to 10-31-08 \$249,300

Role: Investigator

The goal of this project was to evaluate and compare the effects of unilateral and bilateral deep brain stimulation on motor performance (locomotor, balance and upper extremity) in individuals with advanced PD.

10. Fernandez, H. The Restore Study, Michael J. Fox Foundation. 12/06/2006 -9/01/09, \$267,703

Role: Investigator

The goal of this project was to evaluate and compare the effects of rTMS on apathy, depression and motor function in persons with Parkinson's disease

11. Tillman, M.D. Effects of Whole-body Vibration on Spasticity, Gait, Balance, Flexibility & Quality of Life in Individuals with Cerebral Palsy.

HHP Research Opportunity Fund 2006-2007. \$4,500,

Role: Investigator

The goal of this project was to evaluate the effects of whole body vibration training on function in persons with cerebral palsy.

12. Hass, C.J. Resistance training to improve the ability to rise from a chair in individual's with Parkinson's disease.

Dean's Grant for Pre-tenured Faculty. Teachers College Columbia University 2004-2005,\$2,500.

Role: PI

The goal of this project was to evaluate the effects of resistance training on locomotor function in persons with Parkinson's disease.

13. Hass, C.J., Creatine monohydrate supplementation in Parkinson's disease: A pilot study in patients undergoing resistance training.

NIH AT00609, Developmental Research Program, Emory Center for Research on Complimentary and Alternative Medicine in Neurodegenerative diseases.. 2003-2004, \$36,700

Role: PI

The goal of this project was to evaluate the singular and combined effects of resistance training and creatine supplementation on function in persons with Parkinson's disease.

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Mann, William C.	POSITION TITLE Senior Research Career Scientist Director, RORC Distinguished Professor & Chair		
eRA COMMONS USER NAME WCMANN			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Rutgers Univ., New Brunswick, NJ	B.S.	1969	Food Science
Virginia Commonwealth University, Richmond, VA	M.S.	1972	Occupational Therapy
State University of New York at Buffalo	Ph.D.	1977	Higher Education

A. Personal Statement

I am pleased to serve as a continuing mentor on our NIA predoctoral T32 program. I have been a supporter and mentor since the beginning. I currently serve in many roles that put me in an ideal position to advise Dr. Marsiske and his team regarding this grant. I am currently the Director of the Rehabilitation Outcomes Research Center and Research Enhancement Award Program, Senior Research Career Scientist at the North Florida/South Georgia Veterans Health System, a Distinguished Professor and Chair of Occupational Therapy, and Director of the Rehabilitation Sciences Doctoral (RSD) Program at the University of Florida. The mission of the T32 program aligns very closely with the mission of our RSD graduate program. Both programs aim to provide multidisciplinary training in rehabilitation based research and education. Accordingly, all of the graduate students in our RSD program benefit greatly from the T32 program. The RSD trainees have the opportunity to attend T32 sponsored events such as the weekly colloquium, and the annual Aging Research Day. I am also the Associate Program Director of a K12 Rehabilitation Research Career Development Program. In this role I routinely interact with the T32 trainees since these programs also share the common goals of training students and junior faculty in cutting edge rehabilitation research with older and disabled populations. I am continually impressed by the quality of the students and the training received in the T32 program. I am excited and honored to continue my service as a mentor.

B. Positions and Honors

Positions and Employment

1974 - 1980	Assistant Professor, Department of Occupational Therapy, State University of New York at Buffalo
1981 - 1992	Associate Professor, Department of Occupational Therapy, State University of New York at Buffalo
1988 - 2000	Chair, Department of Occupational Therapy, State University of New York at Buffalo
1993 - 2000	Professor, Department of Occupational Therapy, State University of New York at Buffalo
1997 - 2000	Program Director, Doctoral Program in Rehabilitation Science, Department of Occupational Therapy, State University of New York at Buffalo
2000 -	Distinguished Professor, and Chair, Department of Occupational Therapy, University of Florida
2002 - 2004	Research Health Scientist, Rehabilitation Outcomes Research Center, Veterans Health Administration, Gainesville, FL
2009 -	Director of the Rehabilitation Outcomes Research Center, Veterans Health Administration, Gainesville, FL
2011	Senior Research Career Scientist, NF/SG VHS

Honors

2004	Morita Distinguished Fellow, Rehabilitation Hospital of the Pacific, Honolulu, HI, December

2007	Distinguished Professor, University of Florida, College of Public Health and Health Professions
2008	Gary Andrews Visiting Professorship, Australian Association of Gerontology
2009	Institute for Learning in Retirement Outstanding Research Mentor Award
2011	VA Outpatient Clinical Care Systems Redesign Award, Rural Veterans TeleRehabilitation Initiative
2011 - 2018	VA Rehabilitation Research & Development Senior Research Career Scientist Award

C. Selected Peer-Reviewed Publications

1. Chumbler NR, Mann WC, Wu S, Schmid A, Kobb R. The Association of Home-Telehealth and Care Coordination with Improvement of Function and Cognitive Functioning in Frail Elderly Men. **Telemedicine Journal and e-Health**. 2004 10(2);129-137.
2. Helal A, Mann WC, El-Zabadani H, King J, Kaddoura Y, Jansen E. The Gator Tech Smart House: A Programmable Pervasive Space. **Computer - Innovative Technology for Computer Professionals**. 2005 50-60.
3. Classen S, Garvan C, Meuleman J, Ried LD, Mann W, Asal N. Review of prescription medications in home-based older adult with stroke: A pilot study. **Research in Social and Administrative Pharmacy**. 2007 3(1);104-122.
4. Tomita M, Mann WC, Stanton KM, Tomita AD, Sundar V. Use of Currently Available Smart Home Technology by Frail Elders: Process and Outcomes. **Topics in Geriatric Rehabilitation**. 2007 23(1):24-34.
5. Davenport RD, El-Zabadani H, Johnson J, Helal A, Mann WC. Pilot Live-in Trial at the Gator-tech Smart House. **Topics in Geriatric Rehabilitation**. 2007 23(1):73-84.
6. Johnson J, Davenport RD, Mann WC. Consumer Feedback on Smart Home Applications. **Topics in Geriatric Rehabilitation**. 2007 23(1):60-72.
7. Mann WC, Belchoir P, Tomita M, Kemp, BJ. Older Adults' Perception and Use of PDAs, Home Automation System and Home Health Monitoring System. **Topics in Geriatric Rehabilitation**. 2007 23(1):35-46.
8. Bendixen RM, Levy CE, Olive ES, Kobb RF, Mann WC. Cost Effectiveness of a Telerehabilitation Program to Support Chronically Ill and Disabled Elders in Their Homes. **Telemedicine and e-HEALTH**. 2009 15(1):31-38.
9. Classen S, Levy C, McCarthy D, Mann WC, Lanford D, Waid-Ebbs JK. Traumatic brain injury and driving assessment: an evidence-based literature review. **Am J Occup Ther**. 2009 Sep-Oct;63(5):580-91. Review. PMID: 19785257
10. Shechtman O, Classen S, Awadzi K, Mann, WC. Comparison of driving errors between on-the-road and simulated driving assessment: A validation study. **Traffic Injury Prevention**. 2009 10(4): 379-385.
11. Bewernitz MW, Mann WC, Dasler P, Belchior P. Feasibility of machine-based prompting to assist persons with dementia. **Assist Technol**. 2009 Winter;21(4):196-207.PMID:20066886
12. Hubbard Winkler, SL, Vogel B, Hoenig H, Cowper-Ripley DC, Wu S, Fitzgerald SG, Mann WC, Reker DM. Cost, utilization, and policy of provision of assistive technology devices to veterans post-stroke by the VA and Medicare. **Medical Care**. 2010 48(6):558-562.
13. Mann WC, DeMello MA. Comparison of assistive technology use in the United States and Brazil. **Topics in Geriatric Rehabilitation**. 2010 26(1):62-69.
14. Hubbard Winkler SL, Cowper Ripley DC, Wu S, Reker DM, Vogel B, Fitzgerald SG, Mann WC, Hoenig H. Demographic and clinical variation in Veteran Health Administration assistive technology device provision to veterans post-stroke. **Archives of Physical Medicine and Rehabilitation**. 2010 91(3):369-377.

15. Classen S, Levy C, Meyer D, Bewernitz M, Lanford,D., M., Mann, W.C. Simulated Driving Performance of Combat Veterans with Mild Traumatic Brain Injury and Posttraumatic Stress Disorder: A Pilot Study. **American Journal of Occupational Therapy**. 2011 July:Vol. 65, No.4.

D. Research Support

Ongoing Research Support

W81XWH-11-1-0454 (PI/Project Director - Mann) 09/01/2011 - 02/28/2013

Florida Trauma Rehabilitation Center for Returning Military Personnel

Goal: Recognizing the multitude of issues facing military personnel, the Florida Trauma Rehabilitation for Returning Military Personnel (FTRC-RMP) brings together researchers from a range of specialty areas to advance rehabilitation practice through research, and to ultimately succeed in reintegrating Veterans into their families and communities. This project supports nine pilot studies to advance rehabilitation science leading to improved rehabilitation practice for our military personnel returning from OEF/OIF. The goal of the pilot projects is to eliminate or minimize disability, while advancing education of rehabilitation professionals.

IIR 11-119-1 (PI - Mann) 12/01/2011 - 11/30/2015

VA Health Services Research & Development

Nonpharmacologic Management of Challenging Behaviors in Veterans with Dementia

Goal: need brief goal statement The goal of TAP is to minimize external stressors (behavioral manifestations) and enhance caregiver coping resources by providing concrete skills in using activities to engage Veterans. If caregivers have skills, they may experience reduced objective burden (time on duty) and upset and enhanced self-efficacy.

U1KHP18286 (PI - Gonzalez-Rothi) 07/01/2010 - 06/30/2015

Health Resources and Services Administration - subcontracted through the University of South Florida

Faculty Development: Integrating Technology into Nursing Education and Practice Initiative

Goal: Assist in developing on-line course content modules to meet the objectives and outcomes of the grant initiative. The focus areas include simulation, informatics and telehealth.

Role: Co-Principal Investigator

K12 HD055929 (PI - Ottenbacher) 09/25/2007 - 08/31/2012

NIH/NICHD

Rehabilitation Research Career Development Program

Goal: Recruit and train rehabilitation scientists who are occupational and physical therapists. Program activities will provide trainees with the skills necessary to become independent investigators and future leaders and mentors in rehabilitation.

Role: Associate Program Director

ILTC-60 (PI - Rupper) 11/01/2010 - 10/31/2012

VA

Geriatrics and Extended Cares Services

Comparing Modalities for Tele-Health Care Management of Elderly Patients and Their Caregivers

Goal: Compare the outcomes of two delivery modalities of care-management training for dementia CGs. The objectives are: 1) to reduce CG burden through support delivered by a care-management intervention via tele-health technologies (the Internet); 2) to increase CG efficacy through support delivered by a care-management intervention via tele-health technologies; 3) to reduce utilization of non-ambulatory health services by the care recipient through support delivered by a care-management intervention via tele-health technologies; and 4) to evaluate and compare intervention delivery modalities.

Role: Co-Investigator

02917-F HSR&D: REA 07-342 (PI - Mann) 10/01/2006 - 09/30/2012

VHA RR&D

Rehabilitation Outcomes Research Center – Research Enhancement Award Program (RORC-REAP)

Goal: The mission of the Rehabilitation Outcomes Research Center for Veterans with Neurological Impairment (RORC) Research Enhancement Award Program (REAP) is to conduct interdisciplinary research that improves the health, function, and community integration of Veterans challenged by disability and limited access to health related services.

Completed Research Support

VA248-P-0577

(PI - Hoffman)

07/01/2009 - 06/30/2011

VHA

Rural Veterans Tele-Rehabilitation Project (RVTRP)

Goal: To enable access, and to deliver universally high quality rehabilitation to rural veterans using a telehealth approach. Our approach is collaborative, building on and extending existing services.

Role: Co-Investigator

90AM319001

(PI - Mann)

08/01/2008 - 07/31/2010

Administration on Aging

Smart Technology and Universal Design to Support Elders in Maintaining Independent Living

Goal: To increase the number of older Americans who are supported by the latest assistive technologies, home monitoring systems, and application of the principles of universal design.

751CL09

(PI - Mann)

03/30/2009 - 04/30/2010

Florida Developmental Disabilities Council

Developmental Disabilities Assistive Technology Feasibility Project:

Goal: To determine if the use of assistive technology (AT) would appear to be useful in meeting the goal of success in living in a home or community based setting in the state of Florida.

64441

(PI - Belchior)

05/01/2008 - 04/30/2010

Robert Wood Johnson Foundation

Action Video Games to Improve Everyday Cognitive Function in Older Adults.

The goal of this study is to investigate the use of an action video game to enhance visual attention skills in a group of community-dwelling older adults.

Role: Co-Principal Investigator

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Christina Smith McCrae, PhD	POSITION TITLE Associate Professor		
eRA COMMONS USER NAME CSMCCRAE			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Pennsylvania State University	BS	1984-1987	Psychology
Washington University in St. Louis	MA	1993-1995	Psychology
Washington University in St. Louis	PhD	1995-1999	Clinical Psychology
South Texas Veterans Health Care System	Internship	1998-1999	Clinical Psychology
University of Memphis	Postdoc	1999-2001	Clinical Psychology
University of Florida	Residency	2001-2003	Clinical Psychology

A. Personal Statement

My background in clinical geropsychology and behavioral sleep medicine combined with my experience conducting university- and NIH-funded research as a PI and co-I on studies examining sleep and its correlates (including pain and cognition) in older adults, older caregivers, and various medical populations have prepared me to successfully mentor students with interests in sleep, aging, and movement disorders. As a mentor, I have graduated 1 postdoctoral fellow, 2 doctoral students, and 7 master's students. I am currently mentoring 4 doctoral students (2 will be leaving this July for internship and postdoctoral training, respectively). To date, my students have successfully competed for predoctoral fellowships [T32 (2), F31 (1), Social Sciences and Humanities Research Council of Canada (1)] and other awards [American Psychological Association Master's (1) and Dissertation (3) awards] for their research on sleep and aging. Additionally, my 2 graduated doctoral students are now both pursuing independent research careers in faculty positions at Research I institutions.

B. Positions and Honors

Positions and Employment

1987-1988	Research Assistant; Lawrence Johnson & Associates; Washington, DC
1988-1993	Statistician; Department of Commerce, Bureau of the Census; Washington, DC
1996-1997	Behavioral Therapist; Sleep Disorders Lab, Washington University School of Medicine; St. Louis, MO
1998-1999	Geropsychology Intern; South Texas Veterans Health Care System; San Antonio, TX
1999-2001	Project Coordinator; Hypnotic dependence in older adults (AG14738); University of Memphis, Memphis, TN
2001-2003	Psychology Resident; College of Medicine; University of Florida, Gainesville, FL
2001-2006	Assistant Professor; Department of Psychology; University of Florida, Gainesville, FL
2006-2008	Assistant Professor; Department of Clinical & Health Psychology; University of Florida, Gainesville, FL
2008-present	Associate Professor; Department of Clinical & Health Psychology; University of Florida, Gainesville, FL

Professional License & Certifications

2003-present	Psychologist (Florida #PY 6742)
2005-present	Certification, Behavioral Sleep Medicine, American Academy of Sleep Medicine

Other Experience and Professional Memberships

1993-present	Member, American Psychological Association
1993-present	Member, Gerontological Society of America

2000-present	Member, American Academy of Sleep Medicine
2006-present	Member, Sleep Research Society
2007-2008	Consultant, Behavioral Sleep Medicine Committee, American Academy of Sleep Medicine
2007-present	Chair, Insomnia Section, American Academy of Sleep Medicine
2008-present	Chair, Behavioral Sleep Medicine Exam Task Force, American Academy of Sleep Medicine
2010-2013	Member, Executive Board, Society of Behavioral Sleep Medicine
2011-2012	President, Society of Behavioral Sleep Medicine
2011-present	Member, Executive Board, American Board of Sleep Medicine
2012-2013	Chair, Sleep Psychology Specialty Petition Task Force, Society of Behavioral Sleep Medicine

Honors

1996-1998	Student Dissertation Award, Division 20, American Psychological Association; Retirement Research Foundation
1994-1996	Predoctoral Trainee, NIA, Washington University
2000	Fellow, NIA and Brookdale Foundation, Summer Institute on Aging Research
2003-2008	Award Recipient, NIH, Clinical Research Loan Repayment Program
2003-2004	Gerontology Teacher of the Year, Sigma Phi Omega, Delta Iota Chapter, University of Florida
2004-2005	University Scholars Mentor, University of Florida, College of Liberal Arts and Sciences
2005	Fellow, NIH, OBSSR Summer Institute on Design and Conduct of Randomized Clinical Trials
2006	Delegate-at-Large, National Conference on Training in Professional Geropsychology
2007	Brookdale Leadership in Aging Fellowship, Semi-finalist

C. Selected Peer-reviewed Publications (Selected from over 50 peer-reviewed publications)

Most relevant to the current application

1. Dzierzewski*, J. D., Williams*, J., Roditi, D., Marsiske, M., McCoy, K. J. M., McNamara*, J. P. H., Dautovich*, N., & Robinson, M. E., & McCrae, C. S. (2010). Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: Evidence of covariation over time. *Journal of the American Geriatrics Society*, 58(5), 925-930.
2. O'Brien, E. M., Waxenberg, L. B., Atchison, J. W., Gremillion, H. A., Staud, R. M., **McCrae, C. S.**, & Robinson, M. E. (2010). Negative mood mediates the effect of poor sleep on increased pain among chronic pain patients. *The Clinical Journal of Pain*, 26 (4), 310-319.
3. O'Brien EM, Waxenberg LB, Atchison JW, Gremillion HA, Staud RM, **McCrae CS**, et al. (2011). Intraindividual Variability in Daily Sleep and Pain Ratings Among Chronic Pain Patients: Bidirectional Association and the Role of Negative Mood. *Clinical Journal of Pain*, 27(5), 425-433.
4. Anderson, R. J., **McCrae, C. S.**, Staud, R., Berry, R. B., & Robinson, M. E. Predictors of clinical pain in fibromyalgia: Examining the role of sleep. (2012). *Journal of Pain*, 13 (4), 350-358. PMID: 22381437.

Additional recent publications of importance to the field (in chronological order)

1. **McCrae, C.S.**, Rowe, M.A., & Tierney*, C.G., Dautovich*, N.D., DeFinis*, A.L., & McNamara*, J.P.H. (2005). Subjective and objective sleep patterns, sleep complaints, psychological adjustment, and health in community-dwelling older adults. *Journal of Gerontology: Psychological Sciences*, 60B, 182-189.
2. **McCrae, C. S.**, Rowe, M. A., Dautovich*, N. D., A. L., Lichstein, K. L., Durrence, H. H., Riedel, B. W., Taylor, D. J., & Bush, A. J. (2006). Sleep hygiene practices in two community dwelling samples of older adults. *Sleep*, 29, 1551-1560.
3. Dautovich*, N. D., **McCrae, C. S.**, & Rowe, M. A. (2008). The association between napping and nocturnal sleep in a sample of community-dwelling older adults. *Journal of the American Geriatrics Society*, 56, 1681-1686.
4. **McCrae, C. S.**, McNamara*, J. P. H., Rowe, M. A., Dzierzewski*, J. M., Dirk, J., Marsiske, M., & Craggs, J. G. (2008). Sleep and affect in older adults: Using multilevel modeling to examine daily associations. *Journal of Sleep Research*, 17, 42-53.
5. **McCrae, C. S.**, Wilson, N. M., Lichstein, K. L., Durrence, H. H., Taylor, D. J., Riedel, B. W., & Bush, A. J. (2008). Self-reported sleep, demographics, health, and daytime functioning in young old and old old community-dwelling seniors. *Behavioral Sleep Medicine*, 6(2), 106-126.

6. Rowe, M. A., **McCrae, C. S.**, Campbell, J., Cheng, J., Horne, C., Tiegs, T., & Lehman, B. (2008). Actigraphy in Older Adults: Comparison of Stability and Variability of Three Different Lengths of Measurement. *Behavioral Sleep Medicine*, 6(2), 127-145.
 7. Rowe, M. A., **McCrae, C. S.**, Campbell, J., & PeBenito, A. (2008). Sleep pattern differences between older adult caregivers and older adult noncaregivers using objective and subjective measures. *Journal of Clinical Sleep Medicine*, 4, 362-369.
 8. Dzierzewski*, J. D., Williams*, J., Roditi, D., Marsiske, M., McCoy, K. J. M., McNamara*, J. P. H., Dautovich*, N., & Robinson, M. E., & **McCrae, C. S.** (2010). Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: Evidence of covariation over time. *Journal of the American Geriatrics Society*, 58(5), 925-930.
 9. Rowe, M. A., Kairalla, J. A., & **McCrae, C. S.** (2010). Sleep in dementia caregivers and the effect of a nighttime monitoring system. *Journal of Nursing Scholarship*, 42(3), 338-347.
 10. Buman, M. P., Giacobbi, P. R., Dzierzewski*, J. M., Aiken Morgan, A., **McCrae, C. S.**, Roberts, B. L., & Marsiske, M., (2011). Peer volunteers improve long-term maintenance of physical activity in older adults: A randomized controlled trial. *Journal of Physical Activity and Health*, 8(2), 257-66, PMID:21918240.
 11. Dautovich*, N. D., Kay*, D., Perlis, M. L., Dzierzewski*, J. M., Rowe, M. A., & **McCrae, C. S.** (2012). Day-to-day Variability in Nap Duration Predicts Medical Morbidity in Older Adults. *Health Psychology*. Feb 27; Epub ahead of print. PMID:22369491.
 12. Kay*, D. B., Dzierzewski*, J., Rowe, M. A., & **McCrae, C. S.** (2012). Greater night-to-night variability in sleep discrepancy among older adults with a sleep complaint compared to noncomplaining older adults. *Behavioral Sleep Medicine*, 10, 1-15.
 13. **McCrae, C. S.**, Vathauer*, K. E., Dzierzewski*, J. M., & Marsiske, M. (2012). Habitual sleep, reasoning, and processing speed in older adults with sleep complaints. *Cognitive Therapy and Research*, 36(2), 156-164.
 14. Graef, D.M., Janicke, D.M., **McCrae, C.S.**, & Silverstein, J.H. (in press). Quality of life in obese youth with and without sleep problems. *Children's Health Care*.
 15. Williams*, J.M., Kay*, D.B., Rowe, M., & **McCrae, C.S.** (in press). Sleep discrepancy, sleep complaint, and poor sleep among older adults. *Journal of Gerontology: Psychological Sciences*.
- *denotes current or former graduate mentee

D. Research Support

Ongoing Research Support

R01 AR055160-01 (NIH/NIAMS)	McCrae (PI)	05/01/08-04/30/14
Sleep and Pain Interventions in Fibromyalgia: Hyperalgesia and Central Sensitization		
Co-Is: Michael Robinson, Ph.D.; Roland Staud, M.D.; Donald Price, M.D.; Richard B. Berry, M.D.		
Goal: To compare effects of Cognitive-Behavioral Treatment for insomnia (CBTi) and CBT for Pain (CBT-P) on pain and sleep outcomes in Fibromyalgia patients. To explore mechanisms underlying sleep and pain.		
R01CA138808-01 (NIH/NCI)	Pereira (PI)	08/01/09-07/30/14
Cognitive-Behavioral Effects on Sleep, Pain, and Cytokines in Gynecologic Cancer		
Co-Is: Christina S. McCrae, Ph.D. ; Michael Robinson, Ph.D.; Michael Antoni, Ph.D.; Richard Berry, M.D.; Linda Morgan, M.D.; Chegini Nasser, Ph.D.;		
Goal: To examine the effects of a combined Cognitive-Behavioral Treatment for insomnia and pain (CBT-IP) on sleep, pain, and cytokines in patients with gynecological cancer.		
R01AG 039495-01 (NIH/NIA)	Rowe (PI)	08/01/11-07/30/16
Improving Dementia Caregiver Sleep		
Co-Is: Christina S. McCrae, Ph.D. ; Maureen Groer, Ph.D.; John Kairalla, Ph.D.		
Goal: To compare the effects of cognitive-behavioral treatment for insomnia (CBTi) to combined CBTi a nighttime monitoring device on sleep and other biopsychosocial outcomes in caregivers of dementia patients.		

Completed Research Support

R01AR055160-02S1 (NIH/NIAMS)	McCrae (PI)	09/01/09-10/01/2012
Sleep and Pain Interventions in Fibromyalgia: Hyperalgesia and Central Sensitization		

Co-Is: Michael Robinson, Ph.D.; Roland Staud, M.D., Jason G. Craggs, Ph.D.; William Perlstein, Ph.D.
Goal: To extend the Parent Project to investigate the **neural underpinnings** of those changes by examining baseline and post-treatment neuroimaging data following cognitive-behavioral treatment for insomnia.

R21 HL087831-01 (NIH/NHLBI) **McCrae (PI)** 09/01/08-05/31/11
Sleep in Patients with Implantable Cardioverter Defibrillators (ICDs)
Co-Investigators: Samuel Sears, Ph.D.; Richard B. Berry, M.D.; Jamie Conti, M.D., Wei Hu, Ph.D.
Goal: To develop, implement, and test cognitive-behavioral treatment for insomnia for use with ICD patients.

R21HL087831-01S1 (NIH/NHLBI) **McCrae (PI)** 07/01/09-06/31/11
Sleep in Patients with Implantable Cardioverter Defibrillators (ICDs)
Co-Is: Samuel Sears, Ph.D.; Richard B. Berry, M.D.; Jamie Conti, M.D., Wei Hu, Ph.D.
Goal: To study cognitive functioning/performance and sleep in cardiac patients with ICDs.

F31 AG032802-01 (NIH/NIA) Dzierzewski/**McCrae (Mentor)** 05/31/09-05/31/11
Predicting Cognitive Inconsistency from Physical Activity and Sleep in Late-Life
Goal: To investigate whether concurrent variations in sleep and physical activity were lawfully related to variations in cognition, and whether such associations differed by domain of cognition.

R21 AG24459-01A1 (NIH/NIA) **McCrae (PI)** 05/01/2005-4/30/2008
Intraindividual Variability in Sleep and Cognitive Performance in Older Adults with Insomnia
Co-Is: Richard B. Berry, M.D.; Michael Marsiske, Ph.D.
Goal: To confirm the effects of sleep treatment on sleep outcomes, to explore transfer of sleep intervention to cognition, and to investigate the dynamic relationship between sleep and cognition over time.

HHS/SAMSHA McGovern (PI) 05/01/03-04/30/2008
ORHP/MO: DO4RHOO242 McGovern (PI)
Implementing Behavioral Insomnia Treatment for Older Adults in Rural Primary Care Settings
Co-PI: **Christina S. McCrae, Ph.D.**
Goal: To develop and test two brief behavioral sleep interventions for older adults. Done in collaboration with ElderLynk, a federal/state sponsored Health Profession Shortage Area (HPSA) program, providing mental health services to the elderly in Northeast Missouri.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

Follow this format for each person: DO NOT EXCEED 1000 CHARACTERS.			
NAME Pahor, Marco		POSITION TITLE Professor and Chair Institute Director	
eRA COMMONS USER NAME (credential, e.g., agency login) mpahor			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Lycee Chateaubriand, Rome, Italy	B.A.	06/74	Physics/Natural Sciences
Catholic University, Rome, Italy	M.D.	11/80	Medicine and Surgery
Catholic University, Rome Italy	Specialty Thesis	11/84	Internal Medicine, Geriatrics

A. Personal Statement

Dr. Pahor is the Director of the University of Florida Institute on Aging. Under his direction, UF has accumulated in excess of \$100 million in aging-related functioning. The NIA funded Pepper Center, which is the leading research and conceptual partner for this T32, shares a focus on the prevention of disability in older adults.

Dr. Pahor has demonstrated long-term academic excellence, productivity and commitment to multidisciplinary clinical research, education and patient care. Dr. Pahor holds over 32 years of outstanding academic career and 13 years of expertise in key senior leadership roles as Institute/Center director. Dr. Pahor is a nationally and internationally known thought leader in the areas of aging, disability and function in population-based studies clinical trials and translational research. He has an outstanding NIH and federal funding record. He has authored or co-authored over 300 publications in peer reviewed journals, which have resulted in over 15,000 citations. He has extensive expertise in leading multidisciplinary research and mentoring teams, such as the Claude Pepper Older Americans Independence Center, the University of Florida Clinical Translational Sciences Institute KL2 mentoring program, and multicenter clinical trials. Dr. Pahor has special expertise in randomized controlled trials in older adults. He is the principal investigator of The LIFE Study, a large (n=1,635) long-term multicenter trial to assess whether physical activity prevent major mobility disability and health related outcomes in older adults.

B. Positions and Honors

Positions and Employment

1980-1985	Residency, Internal Medicine and Geriatrics, Catholic University, Rome, Italy
1986-1996	Assistant Professor, tenured in 1991, Int. Med. and Geriatrics, Catholic University, Rome
1992-1995	Visiting Scientist for a total of 12 months, Epidemiology, Demography and Biometry Program, National Institute on Aging, Bethesda, MD
1993	Consultant European Economic Community Pharmacoepidemiology
1994-1999	Contract Professor of Pharmacoepidemiology, University of Florence, Italy
1996-1999	Associate Professor, Dept of Preventive Medicine, University of Tennessee, Memphis, TN
1999	Professor with tenure, Dept of Preventive Medicine, University of Tennessee, Memphis, TN
1999-2005	Professor with tenure, Dept of Internal Medicine, Wake Forest University, Winston-Salem, NC
1999-2005	Head Section on Gerontology and Geriatrics, Wake Forest University, Winston-Salem, NC
1999-2005	Director Sticht Center on Aging, Wake Forest University, Winston-Salem, NC
2002-2004	Deputy Associate Dean, Office of Research, Wake Forest University, Winston-Salem, NC
2005-present	Director Institute on Aging, University of Florida, Gainesville, FL
2005-present	Professor and Chair, Department of Aging and Geriatric Research, University of Florida, Gainesville, FL

Other Experience and Professional Memberships

1994	Award recognition for the contributions to the Women's Health and Aging Study, NIH

1996-2000	Associate Editor / Section Editor for International Affairs, J. Am. Geriatr. Soc.
2001-2004	Research Committee, American Geriatrics Society
2003	Board of Scientific Counselors – Intramural Program NIA
2007-2010	National Institute on Aging, Physical Exercise Task Force
2008	National Institute on Aging, National Advisory Council on Aging, review roster of the Division of Behavioral and Social Research
2010	Review roster of the Geriatrics and Clinical Gerontology Program, National Institute on Aging
1997-present	Contributor to several NIH peer review study sections
2000-present	Consulting Editor, Aging, Clinical and Experimental Research
2002-present	Editorial Board: Nutrition, Health and Aging
2004-present	Associate Editor Journal of Gerontology Medical Sciences
2008-present	National Institute on Aging Clinical Trials Advisory Panel

C. Selected Peer-reviewed Publications (Selected from over 300 peer-reviewed publications)

Most relevant to the current application

1. Penninx BW, Messier SP, Rejeski WJ, Di Bari M, Cavazzini C, Applegate WB, **Pahor M**. Physical exercise and the prevention of disability in activities of daily living in older persons with osteoarthritis. Arch.Intern.Med. 2001;161(19):2309-2316. PMID: 11606146
2. The LIFE study investigators. Effects of a physical activity intervention on measures of physical performance: Results of the lifestyle interventions and independence for Elders Pilot (LIFE-P) study. J Gerontol A Biol Sci Med Sci 2006; 66(11): 1157-65. PMID: 17167156
3. Verghese J, Kuslansky G, Holtzer R, Katz M, Xue X, Buschke H, **Pahor M**. Walking while talking: effect of task prioritization in the elderly. Arch Phys Med Rehabil 2007 January; 88(1):50-3. PMID: 17207675. PMCID: PMC1894901
4. Groessl EJ, Kaplan RM, Blair SN, Rejeski WJ, Katula JA, King AC, Fielding RA, Glynn NW, **Pahor M**. A cost analysis of a physical activity intervention for older adults. J Phys Act Health 2009; 6(6):767-774. PMID: 20101920. PMCID: PMC3091594
5. Williamson JD, Espeland M, Kritchevsky SB, Newman AB, King AC, **Pahor M**, Guralnik JM, Pruitt LA, Miller ME. Changes in cognitive function in a randomized trial of physical activity: Results of the Lifestyle Interventions and Independence for Elders Pilot Study. J Gerontol A Biol Sci Med Sci 2009; 64(6):688-694. PMID: 19244157. PMCID: PMC2679423
6. Rosano C, Venkatraman VK, Guralnik J, Newman AB, Glynn NW, Launer L, Taylor CA, Williamson J, Studenski S, **Pahor M**, Aizenstein H. Psychomotor speed and functional brain MRI 2 years after completing a physical activity treatment. J Gerontol A Biol Sci Med Sci 2010; 65(6):639-647. PMID: 20348185. PMCID: PMC2869531
7. Fielding RA, Rejeski WJ, Blair SN, Church T, Espeland MA, Guralnik JM, Gill TM, Hsu FC, Katula JA, King AC, Kritchevsky SB, McDermott MM, Miller ME, Nayfield S, Newman AB, Williamson JD, Bonds DE, Romashkan S, Hadley E, **Pahor M**. The Lifestyle Interventions and Independence for Elders (LIFE) Study: design and methods. J Gerontol A Biol Sci Med Sci 2011;66(11):1226-1237. PMID: 21825283. PMCID: PMC3193523
8. Sourdet S, Abellanvan KG, Soto ME, Houles M, Cantet C, Nourhashemi F, Vellas B, **Pahor M**, Rolland Y. Prognosis of an abnormal one-leg balance in community-dwelling patients with Alzheimer's disease: A 2-year prospective study in 686 patients of the REAL.FR Study. J Am Med Dir Assoc 2012; 13(4):407.e1-407.e6. PMID: 22227074

Additional recent publications of importance to the field (in chronological order)

9. Ferrucci L, Guralnik JM, **Pahor M**, Corti MC, Havlik RJ. Hospital diagnoses, Medicare charges and nursing home admissions in the year when older persons become severely disabled. JAMA 1997;277(9):728-734. PMID: 9042845
10. Onder G, Penninx BW, Balkrishnan R, Fried LP, Chaves PH, Carter CS, Williamson JD, Di Bari M, Guralnik JM, **Pahor M**. Relation between use of angiotensin-converting enzyme inhibitors and muscle strength and physical function in older women: an observational study. Lancet 2002;359(9310):926-930. PMID: 11918911
11. Cesari M, Penninx BW, Newman AB, Kritchevsky SB, Nicklas BJ, Sutton-Tyrrell K, Rubin S, Ding J, Simonsick EM, Harris TB, **Pahor M**. Inflammatory markers and onset of cardiovascular events: results from the Health ABC study. Circulation 2003;108(19):2317-2322. PMID: 14568895
12. Kritchevsky SB, Nicklas BJ, Visser M, Simonsick EM, Newman AB, Harris TB, Lange EM, Penninx BW,

- Goodpaster BH, Satterfield S, Colbert LH, Rubin SM, **Pahor M**. Angiotensin-converting enzyme insertion/deletion genotype, exercise, and physical decline. JAMA. 2005;294(6): 691-698. PMID: 16091571
13. Newman AB, Simonsick EM, Naydeck EM, Kritchevsky SB, Nevitt M, **Pahor M**, Satterfield S, Brach JS, Studenski SA, Harris TB. Association of long-distance corridor walk performance with mortality, cardiovascular disease, mobility limitation, and disability. JAMA 2006;295(17):2018-26. PMID: 16670410
 14. Cesari M, Kritchevsky SB, Newman AB, Simonsick EM, Harris TB, Penninx BW, Brach JS, Tylavsky FA, Satterfield S, Bauer DC, Rubin SM, Visser M, **Pahor M**. Added value of physical performance measures in predicting adverse health-related events: results from the Health, Aging And Body Composition Study. J Am Geriatr Soc 2009 February;57(2):251-9. PMID: 19207142. PMCID: PMC2695653
 15. Harrison DE, Strong R, Sharp ZD, Nelson JF, Astle CM, Flurkey K, Nadon NL, Wilkinson JE, Frenkel K, Carter CS, **Pahor M**, Javors MA, Fernandez E, Miller RA. Rapamycin fed late in life extends lifespan in genetically heterogeneous mice. Nature 2009 July 16;460(7253):392-5. PMID: 19587680. PMCID: PMC2786175

C. Research Support

Ongoing Research Support

NIH-NIA 1U01 AG022376-01	Pahor (PI)	09/01/09-08/31/15

The LIFE study

The major goal of this project is to determine by conducting a Phase 3 randomized, controlled trial (RCT) whether physical exercise prevents major mobility disability in older persons.

NIH-NIA U01AG022376.	Pahor (PI)	09/01/09-08/31/15

The LIFE Study – NHLBI Supplement

The major goal of this project is to assess sleep disturbances and cardiopulmonary outcomes.

NIH-NIA 1P30 AG028740-01	Pahor (PI)	04/01/12-03/31/17

Claude D. Pepper Older Americans Independence Centers

The major goals of this project are the developing, testing and dissemination of effective therapies for the treatment and prevention of physical disability.

NIH-NCRR 1C06RR029852-01	Pahor (PI)	01/14/10-01/13/15

Institute on Aging Clinical Translational Research Building

Goal: to construct the a 40,000 GSF building to host the University of Florida Clinical Translational Research Building.

NIH-NIA 1U01AG030644-01A1	Snyder (PI)	05/05/09-04/30/15

The Testosterone Trial

The major goal of this project is to evaluate the effects of testosterone replacement on physical activity, sexual function, and vitality in older men.

Role: Site PI

NIH-NCRR 1UL1RR029890	Nelson(PI)	07/14/09-03/31/14

UF Clinical and Translational Science Award

This project focuses on the ability of the University of Florida to transform the manner by which it conducts multi-and interdisciplinary clinical and translational research and training.

Role: Co-Investigator

Completed Research Support

NIH-NIA 1 R01 AG026556-01	Pahor (PI)	12/01/06-06/30/12

Oxidative damage, disability and mortality in elders

Ancillary study to the Health, Aging and Body Composition study to evaluate the predictive value of oxidative damage, platelet activation and inflammation for incident mobility disability and mortality in older persons.

NIH-NIA 1 P30 AG028740	Pahor (PI)	04/01/07-03/31/12

Claude D. Pepper Older Americans Independence Centers

The major goals of this project are the developing, testing and dissemination of effective therapies for the

treatment and prevention of physical disability.

NIH-NIA 1 R01 AG027529

Nicklas (PI)

09/15/06-08/31/11

Exercise training and inflammatory risk factors for disability

The goal is to measure plasma concentrations of inflammatory biomarkers in blood samples collected from LIFE participants following randomization to the interventions to test our primary hypothesis that: 1) compared to a non-exercise health education intervention, a 12-month exercise training intervention will decrease concentrations of inflammatory biomarkers in elderly men and women at high risk for physical disability.

Role: Co-Investigator

NIH-NIA 1 P30 AG028740-03S1

Pahor (PI)

09/20/09-08/31/11

Claude D. Pepper Older Americans Independence Centers Supplement

Goal: to assess the impact of mitochondrial function and fatigue on physical function and disability.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Perlstein, William Michael	POSITION TITLE Associate Professor of Clinical and Health Psychology / Research Health Scientist, Malcom-Randall VAMC, BRRC Center of Excellence		
eRA COMMONS USER NAME (credential, e.g., agency login) Perlstein			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
University of Maryland, College Park	B.S.	5/84	Psychology/Zoology
University of Delaware, Newark	M.A.	5/89	Psychology (clinical)
University of Delaware, Newark	Ph.D.	5/95	Psychology (clinical)
University of Pittsburgh, WPIC, Pittsburgh	N/A	6/95	Predoctoral Internship
University of Pittsburgh, WPIC, Pittsburgh	NIH Fellow	2/98	Psychiatry Research

A. Personal Statement

Dr. Perlstein is a clinical psychologist and clinical-cognitive neuroscientist whose research focuses on cognitive neuroscience studies of **aging, neurological and psychiatric disorders**. Toward this end, Dr. Perlstein employs theoretically-motivated cognitive/affective tasks while acquiring measures of brain activity, including high-density scalp-recorded event-related potentials (ERPs) and functional magnetic resonance imaging (fMRI). Dr. Perlstein's recent efforts have been focused on **cognitive and affective studies of cognition and affect in aging**, traumatic brain injury and Parkinson's disease. Dr. Perlstein has mentored 10 doctoral students in his department (**including several very successful trainees from this T32 program**), and has also served as an advisor to approximately 30 additional Masters and Doctoral-level students since beginning his academic career in 1999.

B. Positions and Honors

Positions and Employment

1995-98	NIMH Postdoctoral Fellow, Clinical Research Training in Psychiatry, University of Pittsburgh School of Medicine, Western Psychiatric Institute and Clinic, Pittsburgh, PA
1998-99	Visiting Assistant Professor, Departments of Clinical and Health Psychology and Psychiatry, University of Florida, Gainesville, FL
1999-2006	Assistant Professor, Department of Clinical and Health Psychology, University of Florida, Gainesville, FL
1999-	Adjunct Assistant Professor, Department of Psychiatry, University of Florida, Gainesville, FL
2006-	Associate Professor, Department of Clinical and Health Psychology, University of Florida, Gainesville, FL
1998-2004	Adjunct Assistant Professor, Department of Psychiatry, University of Pittsburgh School of Medicine, Western Psychiatric Institute and Clinic, Pittsburgh, PA
2012-	Research Health Scientist, VA RR&D Brain Rehabilitation Research Center of Excellence, Malcom-Randal VAMC, North Florida/South Georgia Veterans Administration Health System, Gainesville, FL

Other Experience and Professional Memberships

1986-	Member, Society for Psychophysiological Research
1992-	Member, Association for Psychological Science
1998-	Member, American Psychological Association
1999-	Member, Society for Neuroscience
2001-	Member, International Neuropsychological Society
1999	Ad hoc reviewer, NIMH Peer Review Committee K01/MRSDA, BDCN-6
2004, 2005	Reviewer, NIMH, Special Emphasis Panel, Review Group ZMH1 BST-Q (01) S, B-STARTS
2009	Reviewer, Veterans Administration Merit Review Subcommittee, Mental Health and Behavioral Sciences Group
2010-	Special Issue Editor, <i>International Journal of Psychophysiology</i> , "Brain imaging and psycho-

physiology of cognition, affect and motivation in traumatic brain injury”

Honors

1995-98	NIMH Postdoctoral Fellowship Award, Clinical Research Training in Psychiatry
1995, 1998	2 NARSAD Young Investigator Awards
1995-98	Scottish Rite Schizophrenia Research Program, Investigator Award
2001-03	NARSAD Young Investigator Award
2000-05	NIMH K01, Mentored Research Scientist Development Award
2001	Research Mentor Award, UF Department of Clinical and Health Psychology

Licensure: Psychology, Clinical (FL, since 1999; PA (inactive), since 1998)

C. Selected Peer-reviewed Publications (Selected from 43 peer-reviewed publications)

Most relevant to the current application

1. Larson, M.J., & **Perlstein, W.M.** (2009). Awareness of deficits and error processing after traumatic brain injury. *Neuroreport*, 20(16), 1486-90. PMID: 19809369.
2. Demery, J.A., Larson, M.J., Dixit, N.K., Bauer, R.M., & **Perlstein, W.M.** (2010). Operating characteristics of executive functioning tests following traumatic brain injury. *Clin Neuropsychol*, 24(8), 1292-308. PMID: 21069617.
3. **Perlstein, W.M.**, & Larson, M.J. (2011). Psychophysiology and brain imaging of cognition and affect following traumatic brain injury: An overview of the special issue. *Int J Psychophysiol*, 82(1), 1-3. PMID: 21820016.
4. Larson, M.J., Fair, J.E., Farrer, T.J., & **Perlstein, W.M.** (2011). Predictors of performance monitoring abilities following traumatic brain injury: The influence of negative affect and cognitive sequelae. *Int J Psychophysiol*, 82(1), 61-8. PMID: 21315777.
5. Sozda, C.N., Larson, M.J., Kaufman, D.A., Schmalfluss, I.M., & **Perlstein, W.M.** (2011). Error-related processing following severe traumatic brain injury: An event-related functional magnetic resonance imaging (fMRI) study. *Int J Psychophysiol*, 82(1), 97-106. PMID: 21756946.

Additional publications of importance to the field

1. Cohen, J.D., **Perlstein, W.M.**, Braver, T.S., Nystrom, L.E., Noll, D. C., Jonides, J., & Smith, E.E. (1997). Temporal dynamics of brain activation during a working memory task. *Nature*, 386, 604-608. PMID: 9121583.
 2. Carter, C.S., **Perlstein, W.M.**, Ganguli, R., Braar, J., Mintun, M., & Cohen, J.D. (1998). Functional hypo-frontality and working memory in schizophrenia. *Am J Psychiatry*, 155, 1285-1287. PMID:
 3. **Perlstein, W.M.**, Larson, M.J., Dotson, V.M., & Kelly, K.G. (2006). Temporal dissociation of components of cognitive control dysfunction in severe TBI: ERPs and the cued-Stroop task. *Neuropsychologia*, 44, 260-274. PMID: 15979655.
 4. **Perlstein, W.M.**, Carter, C.S., Noll, D.C., Cohen, J.D. (2001). Relation of prefrontal cortex dysfunction to working memory and symptoms in schizophrenia. *Am J Psychiatry*, 158, 1105-1113. PMID: 11431233.
 5. **Perlstein, W.M.**, Elbert, T., & Stenger, V.A. (2002). Dissociation in human prefrontal cortex of affective influences on working memory. *Proc Nat Acad Sci USA*, 99(3), 1736-1741. PMID: 11818573.
 6. **Perlstein, W.M.**, Dixit, N.K., Carter, C.S., Noll, D.C., & Cohen, J.D. (2003). Prefrontal cortex dysfunction mediates deficits in working memory and prepotent responding in patients with schizophrenia. *Biol Psychiatry*, 53, 25-38. PMID: 12513942.
 7. **Perlstein, W.M.**, Cole, M.A., Dixit, N.K., & Demery, J.A. (2004). Parametric manipulation of working memory load in chronic traumatic brain injury. *J Int Neuropsychol Soc*, 10, 724-741. PMID: 153277720.
 8. Larson, M.J., Stigge-Kaufman, D., Schmalfluss, I.M., & **Perlstein, W.M.** (2007). Performance monitoring, error processing, and evaluative control following severe TBI. *J Int Neuropsychol Soc*, 13(6), 961-971. PMID: 17942014.
 9. Larson, M.J., Kaufman, D.A.S., Kellison, I., Schmalfluss, I., & **Perlstein, W.M.** (2009). Double jeopardy! The additive consequences of negative affect on performance monitoring decrements following traumatic brain injury. *Neuropsychology*, 23(4), 433-434. PMID: 19586208.
-

10. Larson, M.J., Kaufman, D.A., & **Perlstein, W.M.** (2009). Conflict adaptation and cognitive control adjustments following traumatic brain injury. *J Int Neuropsychol Soc*, 15(6), 927-37. PMID: 19765356.

D. Research Support

Ongoing Research Support

R21 NS079767 Bowers (PI) 6/01/12 – 5/31/14 1.2 calendar
 NIH/NINDS \$175,000
 Emotion regulation, executive function and Parkinson disease
 The overall goal of this project is to learn whether Parkinson disease patients can upregulate their responses to emotional stimuli and whether success in doing so depends on the integrity of frontal-executive functioning.
 Role: Co-I

Robinson (PI) 12/01/09-11/30/14 1.2 calendar
 NIH/NCAM \$250,000
 Brain imaging and pain: Analysis of placebo analgesia
 This research uses fMRI and connectivity analyses to examine the neural bases of placebo analgesia.
 Role: Co-I

Dotson (PI) 3/01/11-2/29/14 0.6 calendar
 McKnight Brain Research Foundation \$100,000
 Effects of exercise on memory in geriatric depression: An fMRI pilot study
 This research examines the effects of aerobic exercise on memory and memory-related brain activity in depressed elders.
 Role: Co-I

F31 MH102089-01 Gravano (PI) 8/16/13 - 8/15/15 0.0 calendar
 NIH/NIMH \$72,614
 Dissociating mTBI and PTSD brain activity at rest
 This research uses resting-state functional magnetic resonance imaging to dissociate mild traumatic brain injury and post-traumatic stress disorder in Veterans of the OEF/OIF conflicts.
 Role: Mentor

Gravano (PI) 1/01/13 - 12/31/13 0.0 calendar
 UF/CTSI \$7,500
 An investigation of structural connectivity in PTSD, mTBI, and PTSD/mTBI
 This research uses diffusion-tensor imaging to dissociate structural brain connectivity patterns and their relationship to unique and overlapping cognitive, affective and behavioral symptoms in mild traumatic brain injury, post-traumatic stress disorder and combat-control Veterans of the OEF/OIF conflicts.
 Role: Mentor

Hill-Jarrett (PI) 1/01/13 - 12/31/13 0.0 calendar
 UF/CTSI \$7,500
 White matter lateralization of the parietofrontal orienting network as a biomarker predicting degree of attention impairment following traumatic brain injury: Insights from diffusion MRI tractography
 This research uses diffusion-tensor imaging to understand the influence of TBI on neural systems that subserve visuospatial attention.
 Role: Mentor

Pending Research Support

W81XWH-11-1_0454 Perlstein (sub-project PI) awaiting IRB approval 2.4 calendar
 DOD/TATRC \$125,740

Dissociating Functional Brain Activity in Blast-Related Traumatic Brain Injury and Post-Traumatic Stress Disorder

The major goals of this project are to employ functional magnetic resonance imaging in the context of novel affective and cognitive tasks to dissociate brain activity associated with blast-induced mild traumatic brain injury and post-traumatic stress disorder, in conjunction with multiple measures of cognitive, affective, and symptomalogical functioning.

Role: Subproject PI

Letzen (PI)

awaiting counsel review

0.0 calendar

NIH/NCAM

The effects of mood on functional brain connectivity in low back pain patients during rest

This research uses resting-state functional magnetic resonance imaging to examine affective- and positive- and pain-related negative mood on default mode network activity.

Role: Co-Mentor

OVERLAP: None

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Perri, Michael Gerard	POSITION TITLE Professor and Dean
eRA COMMONS USER NAME (credential, e.g., agency login) mperri	

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)*

INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
Fordham University, Bronx, NY	B.S.	06/73	Psychology
University of Missouri, Columbia, MO	M.A.	12/75	Clinical Psychology
University of Missouri, Columbia, MO	Ph.D.	08/78	Clinical Psychology

A. Personal Statement

The major focus of my current research is the development, evaluation, and dissemination of cost-effective treatments for the management of obesity in rural settings, including the use of alternatives to face-to-face interventions. **I am a member of the Leadership Group of the University of Florida Institute on Aging, and I am aligned with the NIA-funded Pepper Center.** Although my research is generally not aging-focused, per se, my work on obesity prevention is largely focused on **midlife and older populations. Moreover, with the significant comorbidities associated with obesity, I believe our work speaks to one of the key potentially modifiable risk factors for disability at the core of this T32 training program.**

The major focus of my current research is the development, evaluation, and dissemination of cost-effective treatments for the management of obesity in rural settings, including the use of alternatives to face-to-face interventions. Currently, I am Dean of the University of Florida College of Public Health and Health Professions and the Robert G. Frank Professor of Clinical and Health Psychology. I have an extensive research background in obesity treatment and in health promotion and disease prevention through changes in diet and physical activity. I have contributed to 161 publications, including 126 peer-reviewed journal articles, 4 books, and 30 book chapters/monographs. The empirical findings from the 18 randomized controlled trials conducted by my research team have had a significant impact on theory, research, and clinical care related to behavioral treatment of obesity. In 2008, I received the American Psychological Association's Samuel M. Turner Award for Distinguished Contributions to Applied Research in Clinical Psychology.

B. Positions and Honors

Positions and Employment

1978-1980	Assistant Professor, Department of Psychology, U. of Rochester, Rochester, NY
1980-1985	Assistant Professor, Associate Professor (1985), Psychiatry Dept., Indiana U. Medical School
1981-1985	Chief, Psychology Service, Indianapolis VAMC
1985-1990	Associate Professor, Department of Psychology, Fairleigh Dickinson U., Teaneck, NJ
1989-1990	Professor, Department of Psychology, Fairleigh Dickinson U., Teaneck, NJ
1990-	Professor, Department of Clinical and Health Psychology, U. of Florida, Gainesville, FL
1992-2004	Area Head, Health Psychology Division, Department of Clinical and Health Psychology, U. of Florida, Gainesville, FL
2004-2007	Associate Dean for Research, College of Public Health and Health Professions, U. of Florida
2007-	Dean, College of Public Health and Health Professions, U. of Florida (2007-9 as Interim Dean)

Other Experience and Professional Memberships

1986 - 1989 Consulting Editor, *Journal of Consulting and Clinical Psychology*
1987 - 1994 Associate Editor, *Psychology of Addictive Behavior*
1991 - 1993 Consulting Editor, *Annals of Behavioral Medicine*
1992 - 1993 Consulting Editor, *Health Psychology*
1992 - 2010 Ad-hoc Member, Special Emphasis Review Panels of NHLBI and NIDDK
1994 - Consulting Reviewer, Institute of Medicine (Committee to Develop Criteria for Evaluating the Outcomes of Approaches to Prevent and Treat Obesity)
2000 - Consulting Editor, *Eating Behaviors*
2003 - 2007 Member, Data and Safety Monitoring Board for the Weight Loss Maintenance Trial, NHLBI
2004 - 2008 Member, Data and Safety Monitoring Board for the POUNDS Lost Study, NHLBI
2002 - 2010 Member, Data and Safety Monitoring Board for Look AHEAD Study, NIDDK
2010 -2012 Associate Editor, *Journal of Consulting and Clinical Psychology*
2010 - Chair, Data and Safety Monitoring Board for the EARLY Weight Loss Trials, NHLBI

Honors

1991 Fellow, Division of Health Psychology, American Psychological Association
1997 Fellow, North American Association for the Study of Obesity
1999 Fellow, Society of Behavioral Medicine
2001 University of Florida Research Foundation Professor for 2001-2004
2003 Distinguished Service Award, Florida Psychological Association
2005 Fellow, Society of Clinical Psychology, American Psychological Association
2008 Recipient, Samuel Turner Award for Clinical Research, American Psychological Association
2010 Recipient, Robert G. Frank Endowed Professorship in Clinical and Health Psychology
2013 Distinguished Research Mentor, Society of Behavioral Medicine

C. Selected Peer-reviewed Publications (Selected from 126 peer-reviewed publications)

Most relevant to the current application

1. Perri, M.G., Limacher, M.C., Durning, P.E., Janicke, D.M., Lutes, L.D., Bobroff, L.B., et al. (2008). Extended-care programs for weight management in rural communities: The treatment of obesity in underserved rural settings (TOURS) randomized trial. *Archives of Internal Medicine*, 168(21), 2347-2354. PMID: 19029500
2. Befort, C.A., Donnelly, J.E., Sullivan, D.K., Ellerback, E.F., & Perri, M.G. (2010). Group versus individual phone-based obesity treatment for rural women: A pilot study. *Eating Behaviors*, 11(1), 11-17. PMID: 19962115
3. Rejeski, W.J., Brubaker, P.H., Goff, D.C. Jr, Bearon, L.B., McClelland, J.W., Perri, M.G., et al. (2011). Translating weight loss and physical activity programs into the community to preserve mobility in older, obese adults in poor cardiovascular health. *Archives of Internal Medicine*, 171, 880-886. PMID: 21263080
4. Milsom, V.A., Ross Middleton, K.M., & Perri, M.G. (2011). Successful long-term weight loss maintenance in a rural population. *Clinical Interventions in Aging*, 6, 1-7. PMID: 22162646
5. Ross Middleton, K.M., Patidar, S.M., & Perri, M.G. (2011). The impact of extended care on the long-term maintenance of weight loss: A systematic review and meta-analysis. *Obesity Reviews*. [Epub ahead of print] PMID:22212682
6. Radcliff, T. A., Bobroff, L. B., Lutes, L. D., Durning, P. E., Limacher, M. C., Daniels, M. J., Martin, D. & Perri, M. G. (in press). Comparing costs of extended care programs for the management of obesity in rural settings. *Journal of the Academy of Nutrition and Dietetics*. 112, 1363-1373. PMID: 22818246.
7. Befort, C. A., Nazir, N., & Perri, M. G. (2012). Prevalence of obesity among adults from rural and urban areas of the United States: Findings from NHANES (2005-2008). *The Journal of Rural Health*, 28, 392-397. doi: 10.1111/j.1748-0361.2012.00411.x.
8. Melvin, C. L., Corbie-Smith, G., Kumanyika, S., Pratt, C. A., Nelson, C, Walker E. R., Ammerman, A., Ayala, G. X., Best, L. G., Cherrington, A. L., Economos, C. D., Green, L. W., Harman, J., Hooker, S. P.,

Murray, D. M., Perri, M. G., & Ricketts, T. C. (in press). Developing an agenda for cardiovascular disease prevention in high-risk rural communities: Guiding principles and recommendations. *American Journal of Public Health*.

Additional recent publications of importance to the field (in chronological order)

1. Kumanyika, S.K., Van Horn, L., Bowen, D., Perri, M.G., Rolls, B., Czajkowski, S., et al. (2000). Maintenance of dietary behavior change. *Health Psychology*, 19 (Suppl. 1), 42-56. PMID: 10709947
2. Perri, M.G., Anton, S.D., Durning, P.E., Ketterson, T.U., Sydeman, S.J., Berlant, N.E., et al. (2002). Adherence to exercise prescriptions: Effects of prescribing moderate versus higher levels of exercise intensity and frequency. *Health Psychology*, 21(5), 452-458. PMID: 12211512
3. Manson, J.E., Greenland, P., La Croix, A.Z., Stefanick, M.L., Mouton, C.P., Oberman, A., Perri, M.G., et al. (2002). Walking compared with vigorous exercise for the prevention of cardiovascular events in women. *New England Journal of Medicine*, 347(10), 716-725. PMID: 12213942
4. Duncan, G.E., Perri, M.G., Anton, S.D., Limacher, M.C., Martin, A.D., Lowenthal, D.T., et al. (2004). Effects of exercise on emerging and traditional cardiovascular risk factors. *Preventive Medicine*, 39(5), 894-902. PMID: 15475021
5. Duncan, G.E., Anton, S.A., Sydeman, S.J., Newton, R.L., Jr., Corsica, J.A., Durning, P.A., Ketterson, T.U., Martin, A.D., Limacher, M.C., & Perri, M.G. (2005). Prescribing exercise at varied levels of intensity and frequency: A randomized trial. *Archives of Internal Medicine*, 165(20), 2362-2369. PMID: 16287765
6. Howard, B.V., Van Horn, L., Hsia, J., Manson, J.E., Stefanick, M.L., Wassertheil-Smoller, S., Kuller, L.H., LaCroix, A.Z., Langer, R.D., Lasser, N.L., Lewis, C.E., Limacher, M.C., Margolis, K.L., Mysiw, W.J., Ockene, J.K., Parker, L.M., Perri, M.G. et al. (2006). Low-fat dietary pattern and risk of cardiovascular disease: The women's health initiative randomized controlled dietary modification trial. *The Journal of the American Medical Association*, 295(6), 655-666. PMID: 16467234
7. Tinker, L.F., Bonds, D.E., Margolis, K.L., Manson, J.E., Howard, B.V., Larson, J., Perri, M.G., Beresford, S.A., Robinson, J., Rodriguez, B., Safford, M., Wenger, N., Stevens, V., & Parker, L.M. (2008). Low-fat dietary pattern and risk of treated diabetes mellitus in postmenopausal women: The women's health initiative (WHI) randomized controlled dietary modification trial (DMT). *Archives of Internal Medicine*, 168(14), 1500-1511. PMID: 18663162
8. Murawski, M.E., Milsom, V.A., Ross, K.M., Rickel, K.A., DeBraganza, N., Gibbons, L.M., & Perri, M.G. (2009). Problem solving, treatment adherence and weight-loss outcome among women participating in lifestyle treatment for obesity. *Eating Behaviors*, 10(3), 146-151. PMID: PMC2726832
9. Nackers, L.M., Ross, K.M., & Perri, M.G. (2010). The association between rate of initial weight loss and long-term success in obesity treatment: Does slow and steady win the race? *International Journal of Behavioral Medicine*, 17(3), 161-167. PMID: 20443094
10. Manini, T.M., Newman, A.B., Fielding, R., Blair, S.N., Perri, M.G., Anton, S.D., et al. (2010). Effects of exercise on mobility in obese and nonobese older adults. *Obesity*, 18(6), 1168-1175. PMID: 19834467
11. Anton, S.D., Manini, T.M., Milsom, V.A., Dubyak, P., Cesari, M., Cheng, J., et al. (2011). Effects of a weight loss plus exercise program on physical functioning in overweight, older women: A randomized controlled trial. *Clinical Interventions in Aging*, 6, 141-149. PMID: 21753869
12. Kiernan, M., Brown, S. D., Schoffman, D. E., Lee, K., King, A. C., Taylor, C. B., Schleicher, N. C., & Perri, M. G. (2012). Promoting healthy weight with "Stability Skills First": A randomized trial. *Journal of Consulting and Clinical Psychology*. Advance online publication. doi:10.1037/a0030544

D. Research Support

Ongoing Research Support

1R18 HL087800

Perri (PI)

06/01/08 - 05/31/13

Rural lifestyle intervention treatment effectiveness trial (Rural LITE)

The major objective of this study is to conduct a randomized controlled trial evaluating the effects of three doses of lifestyle treatment on 2-year changes in body weight in obese adults from underserved rural areas.

Role: PI

1 R18 DK082374-01A1 Janicke (PI) 07/01/09 - 06/30/13
Extension family lifestyle intervention project (FLIP for Kids)
The major objective of this randomized controlled trial is to evaluate the long-term effects of comprehensive "Family-Based" and "Parent-Only" behavioral interventions on measures of child weight and health status.
Role: Co-Investigator

R01 CA155014 Befort (PI) 08/01/11 - 05/31/16
Group Phone-Based Weight Control among Rural Breast Cancer Survivors
The major goal of this RCT is to compare the impact of group phone-based lifestyle intervention to mail-only intervention on weight loss, quality of life, and breast cancer biomarkers at 18 months among rural breast cancer survivors

Completed Research Support

1 R01 HL073326 Perri (PI) 06/01/03 - 05/31/08
Treatment of obesity in underserved rural settings - TOURS
The major goal of this project was to evaluate the effects of long-term weight management programs in obese women, 50-75 years of age, from rural counties.
Role: PI

1 R34 DK071555 Janicke (PI) 10/01/05 - 09/30/08
Sensible treatment of obesity in rural youth – STORY
This feasibility study examined the effects of two group interventions designed to promote weight management in overweight children and their parents in medically underserved, rural settings.
Role: Co-Investigator

1 R01 HL076441 Rejeski (PI) 08/01/05 - 07/31/10
Cooperative lifestyle intervention program (CLIP)
The goals of this project were to test the effects of a physical activity and weight loss on mobility disability in the treatment of older, overweight adults who have evidence of cardiovascular disease or metabolic syndrome.
Role: Co-Investigator

1 R01 CA112594 Kiernan (PI) 07/11/07 - 05/31/11
Promoting healthy weight with "Stability First"
The primary aim of this study was to test whether training obese individuals in weight stabilization skills prior to initiating weight-loss treatment produces greater long-term weight reductions compared to standard therapy.
Role: Co-Investigator

2 R01 HD036904-06 Wilfley (PI) 12/01/09 – 8/31/12
Childhood obesity treatment: A maintenance approach
The major objective of this randomized controlled trial is to test behavioral interventions designed to promote and sustain healthy body weights in overweight children.
Role: Co-Investigator

Pending

1 R18 HL112720 Perri (PI) 06/01/13 - 05/31/18
Rural Lifestyle Eating and Activity Program (Rural LEAP)
This trial will test the effects of two telehealth interventions for the long-term management of obesity in rural settings.
Role: PI

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Michael E. Robinson	POSITION TITLE Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) MROBINSON			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Ohio Wesleyan University	B.A.	1980	Psychology
Bowling Green State University, Ohio	M.A.	1985	Psychology
Bowling Green State University, Ohio	Ph.D.	1988	Psychology
Duke University Medical Center	Residency	1988	Medical Psychology

A. Personal Statement

My Doctoral training was as a Psychologist, with an emphasis in Health Psychology. In addition to expertise in the psychological influences and predictors of clinical pain, I have a significant expertise in psychophysics and psychophysiology, and neuroimaging of pain. I have a broad background in experimental design and statistical analysis. I taught Research Design and Statistics at the graduate level for 14 years, and I am jointly appointed in the Dept. of Epidemiology and Biostatistics. I have served as PI on multiple federal grants with a successful publishing record. I have served as the statistician on over a dozen federal grants and have over 200 publications, for most of which I completed the data analyses. Most relevant to this proposal are my work on pain Patient Centered Outcomes, Pain Disparities, and Decision-Making in pain treatment. These areas of expertise are the empirically supported, and NIH funded research products, ready for translation to a teaching and learning environment. I also have extensive experience in teaching about pain and mentoring of multidisciplinary trainees and have served on a number of multidisciplinary pain treatment teams. The assembled team of investigators has a long history of collaboration, and their research products will allow the project to involve state-of-the-art knowledge and empirically validated educational information to be integrated into the project. **My research on aging is collaborative. I have served as a coinvestigator on studies by Ann Horgas and Christina McCrae (both mentors on this proposal). With Horgas, we examined pain in older adults with dementia. With McCrae, we examine the experience of pain in older adults with insomnia.** I have successfully mentored junior faculty, postdoctoral fellows, and graduate students.

B. Position and Honors:

Academic Positions

1988-1993 Assistant Professor, Dept. of Clinical and Health Psychology, University of Florida
1993-2001 Associate Professor, Dept. of Clinical and Health Psychology, University of Florida
2001-present Professor, Depts. of Clinical and Health Psychology, Epidemiology and Biostatistics, Anesthesiology, Physical Therapy

Research Positions

1990-2004 Instructor for "Research Design, Measurement and Statistical Analysis in Clinical Psychology" a graduate level course in design and measurement, and statistics
1993-present Director, Center for Pain Research and Behavioral Health, University of Florida
2011- present Director of Research Programs and Development, Dept. of Clinical and Health Psychology

C. Relevant Peer-Reviewed Publications (selected from over 250):

1. **Robinson**, M.E., J.G. Craggs, D.D. Price, W.M. Perlstein, and R. Staud, *Gray matter volumes of pain-related brain areas are decreased in fibromyalgia syndrome*. J Pain, 2011. **12**(4): p. 436-43.
2. Alappattu MJ, B.M., Bialosky JE, George SZ, **Robinson** ME, *Stability of behavioral estimates of activity-dependent modulation of pain*. Journal of Pain Research, 2011 **4**(1): p. 151-157
3. **Robinson**, M.E., J.E. Bialosky, M.D. Bishop, D.D. Price, and S.Z. George, *Supra-threshold scaling, temporal summation, and after-sensation: relationships to each other and anxiety/fear*. J Pain Res, 2010. **3**: p. 25-32.
4. Bishop, M.D., J.G. Craggs, M.E. Horn, S.Z. George, and M.E. **Robinson**, *Relationship of intersession variation in negative pain-related affect and responses to thermally-evoked pain*. J Pain, 2010. **11**(2): p. 172-8.
5. Alqudah, A.F., A.T. Hirsh, L.A. Stutts, C.D. Scipio, and M.E. **Robinson**, *Sex and race differences in rating others' pain, pain-related negative mood, pain coping, and recommending medical help*. J Cyber Ther Rehabil, 2010. **3**(1): p. 63-70.
6. Hirsh, A.T., M.P. Jensen, and M.E. **Robinson**, *Evaluation of nurses' self-insight into their pain assessment and treatment decisions*. J Pain, 2010. **11**(5): p. 454-61.
7. Nisenzon, A.N., M.E. **Robinson**, D. Bowers, E. Banou, I. Malaty, and M.S. Okun, *Measurement of patient-centered outcomes in Parkinson's disease: What do patients really want from their treatment?* Parkinsonism Relat Disord, 2010.
8. O'Brien, E.M., R.M. Staud, A.D. Hassinger, R.C. McCulloch, J.G. Craggs, J.W. Atchison, D.D. Price, and M.E. **Robinson**, *Patient-centered perspective on treatment outcomes in chronic pain*. Pain Med, 2010. **11**(1): p. 6-15.
9. Stutts, L.A., A.T. Hirsh, S.Z. George, and M.E. **Robinson**, *Investigating patient characteristics on pain assessment using virtual human technology*. Eur J Pain, 2010. **14**(10): p. 1040-5.
10. Wandner, L.D., L.A. Stutts, A.F. Alqudah, J.G. Craggs, C.D. Scipio, A.T. Hirsh, and M.E. **Robinson**, *Virtual human technology: patient demographics and healthcare training factors in pain observation and treatment recommendations*. J Pain Res, 2010. **3**: p. 241-7.
11. Hirsh, A.T., S.B. Callander, and M.E. **Robinson**, *Patient demographic characteristics and facial expressions influence nurses' assessment of mood in the context of pain: A Virtual Human and lens model investigation*. Int J Nurs Stud, 2011.
12. Nisenzon, A.N., M.E. **Robinson**, D. Bowers, E. Banou, I. Malaty, and M.S. Okun, *Measurement of patient-centered outcomes in Parkinson's disease: What do patients really want from their treatment?* Parkinsonism Relat Disord, 2011. **17**(2): p. 89-94.
13. Hirsh, A.T., A.F. Alqudah, L.A. Stutts, and M.E. **Robinson**, *Virtual human technology: Capturing sex, race, and age influences in individual pain decision policies*. Pain, 2008. **140**(1): p. 231-238.
14. George, S.Z., D.S. Teyhen, S.S. Wu, A.C. Wright, J.L. Dugan, G. Yang, M.E. **Robinson**, and J.D. Childs, *Psychosocial education improves low back pain beliefs: results from a cluster randomized clinical trial (NCT00373009) in a primary prevention setting*. Eur Spine J, 2009. **18**(7): p. 1050-8.
15. Hirsh, A.T., S.Z. George, and M.E. **Robinson**, *Pain assessment and treatment disparities: A virtual human technology investigation*. Pain, 2009. **143**(1-2): p. 106-113.

D. Research Support (last 3 years)

ACTIVE

R01-NS38767 (Staud)

2/1/2004 - 8/31/2010

NIH/NINDS

Mechanisms of Pain in Patients with Fibromyalgia Syndrome

The major goals of this project are to use psychophysical sensory testing to investigate mechanisms of fibromyalgia related pain.

RO3 AR051128-01A1 (George)

7/1/2005 – 3/30/2009

NIH/NIAMS

Behavioral Interventions for Low Back Pain

This randomized trial compared the efficacy of two different behavioral interventions for reducing disability in patients with acute and sub-acute low back pain.

PR054098 (George) 6/1/2006 – 5/30/2010
DOD

Prevention of Low Back Pain in the Military: A Randomized Clinical Trial

This cluster randomized clinical trial investigates the effect of a novel prevention program to limit the development of chronic low back pain in Soldiers.

R21 AT002796-01A1(George) 10/1/2006 – 5/30/2009
NIH/NCCAM

Mechanisms of Neural Mobilization for Chronic Pain

This study investigated if a novel manipulative and body-based method (neural mobilization) reduced quantitative sensory testing measure of central sensitization.

1R01NR010324-01 (Robinson) 09/29/2006 – 06/30/2010
NIH/NINR

Pain Rehabilitation: Patient-Centered Outcomes

This study investigates the reliability and validity of patient determined criteria for outcomes related to various pain rehabilitation interventions.

R01AR053541 (Staud) 01/01/2007 – 12/31/2011
NIH/NIAMS

Peripheral and Central Mechanisms of Pain in Patients with Fibromyalgia

The major goals of this project are to modulate peripheral nociceptive input to investigate mechanisms of fibromyalgia related pain.

1 R01AR055160-01 (McCrae) 05/01/2008-04/30/2013
NIH/NIAMS

Sleep and Pain Interventions in Fibromyalgia: Hyperalgesia and Central Sensitization

The goal of this project is to investigate the neural underpinnings of those changes by examining the baseline and post-treatment neuroimaging data following cognitive-behavioral treatment for insomnia.

1 R01CA138808-01 (Pereira) 08/20/2009-05/31/2014

National Institutes of Health/National Cancer Institute

Cognitive-Behavioral Effects on Sleep, Pain, and Cytokines in Gynecologic Cancer

Role: Co-Investigator

The major goal of this project is investigate the mechanisms of sleep and cognitive treatment in pain processing in cancer pain.

R01-AT001424 (Robinson) 4/01/2003 – 11/30/2014
NIH/NCCAM

Brain Imaging and Pain: Analysis of Placebo Analgesia

The major goal of this project is to investigate mechanisms of placebo analgesia.

1 R01AR055160-02S1 (McCrae) 09/01/2009-10/01/2011
NIH/NIAMS

Sleep and Pain Interventions in Fibromyalgia: Hyperalgesia and Central Sensitization

The goal of this project is to extend the Parent Project to investigate the neural underpinnings of those changes by examining the baseline and post-treatment neuroimaging data following cognitive-behavioral treatment for insomnia.

5R01DE013208 (Robinson) 09/01/2009 – 08/31/2012

NIB/NIDCR

Pain Treatment Decisions: Influence of Sex, Race, and Age.

The goal of this project is to investigate race, sex, and age biases in decisions about pain, using virtual human technology.

Central Mechanisms of Body Based Intervention for Musculoskeletal Low Back Pain”

Role on Project: Co-investigator (1.2 person/month)

Agency: NIH (NCAAM) (05/01/2011 – 04/30/2016)

Direct Costs (year): \$225,000

Junior, Funded Mentors in Training

BIOGRAPHICAL SKETCH

NAME Anton, Stephen Douglas	POSITION TITLE Assistant Professor and Interim Chief		
eRA COMMONS USER NAME antonsd			
EDUCATION/TRAINING			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
Florida State University, Tallahassee, FL	BA	1997	Psychology
University of Florida, Gainesville FL	MS	1999	Clinical & Health Psychology
University of Florida, Gainesville FL	Ph.D.	2003	Clinical & Health Psychology
Louisiana State University, Baton Rouge, LA Pennington Biomedical Research Center	Postdoctoral Fellow	2006	Behavioral Medicine

A. Personal Statement

I am pleased to continue as a "Mentor in Training" for this next cycle of the T32. I have played this role for three years now. I am an Assistant Professor with a joint appointment in the Department of Clinical and Health Psychology and the Department of Aging & Geriatric Research. I specialize in health promotion, preventive medicine, and healthy weight management. My research focuses on developing and testing the efficacy of lifestyle based (e.g., caloric restriction and exercise) and alternative treatment modalities (e.g., nutraceuticals) for preventing and treating metabolic conditions associated with aging, such as obesity and type 2 diabetes,.

B. Positions and Honors**Positions and Employment**

1999	Instructor, Santa Fe Community College
1997-2002	Research Assistant, University of Florida
2002-2003	Pre-doctoral Psychology Intern, Medical University of South Carolina, Charleston, SC
2003-2006	Post-doctoral Fellow of Psychology, Pennington Biomedical Research Center, Louisiana State University
2007-	Assistant Professor, Department of Aging and Geriatric Research & Department of Clinical and Health Psychology, University of Florida

Professional Awards and Honors

2000	UF Clinical & Health Psychology Award for Outstanding Research (Nomination)
2001	Society of Behavioral Medicine Paper Citation – "Effects of exercise prescriptions on exercise adherence"
1997-2001	J. Hills Miller Presidential Fellowship, awarded each year to a small number of students based on campus wide competition, University of Florida, Gainesville, FL
2008	Research Travel Award, National Institute on Aging Conference on Idiopathic Fatigue and Aging
2009	Research Travel Award, National Institute on Aging Bench to Bedside Conference on Inflammation and Nutrient Metabolism.
2009	Outstanding Young Alumni honoree, College of Public Health and Health Professions, University of Florida, Gainesville, FL
2009	Thomas H. Maren Junior Investigator Award Recipient, Awarded each year to one Assistant Professor in College of Medicine, University of Florida, Gainesville, FL

C. Selected Peer-reviewed Publications (Selected from 60 peer-reviewed publications)

Most relevant to the current application

1. Anton, S.D., Manini, T.M., Milsom, V.A., Dubyak, P., Cesari, M., Cheng, J., Daniels, M.J., Marsiske, M., Pahor, M., Leeuwenburgh, C., Perri, M.G. (2011). Effects of a weight loss plus exercise program on physical function in overweight, older women: A randomized controlled trial. *Clin Interv Aging*, 6, 141-149. PMID: 21753869
2. Anton, S.D., Duncan, G.E., Limacher, M.C., Martin, A.D., Perri, M.G. (2011). How much walking is needed to improve cardiorespiratory fitness? An examination of the 2008 Physical Activity Guidelines for Americans. *Res Q Exerc Sport*, 82(2), 365-370. PMID: 2169918
3. Anton, S.D. & Manini, T.M. (2010). Does self-reported physical activity underestimate the importance of activity in cardiovascular disease prevention? *Curr Cardiovasc Risk Rep*, 4, 293-301. PMID: 16411058.
4. Sacks, F.M., Bray, G.A., Carey, V.J., Smith, S.R., Ryan, D.H., Anton, S.D., Williamson, D.A. (2009). Comparison of weight-loss diets with different compositions of fat, protein, and carbohydrates. *N Engl J Med*, 360(9), 859-873. PMID: 19246357
5. Duncan, G.E., Perri, M.G., Anton, S.D., Limacher, M.C., Martin, A.D., Lowenthal, D.T., Arning, E., Bottiglieri, T., Stacpoole, P.W. (2004). Effects of exercise on emerging and traditional cardiovascular risk factors. *Prev Med*, 39(5), 894-902. PMID: 15475021

Additional recent publications of importance to the field

1. Perri, M.G., Anton, S.D., Ketterson, T.U., Berlant, N., Kanasky, W.F., Sydesman, S.J., Limacher, M.C., Martin, A.D. (2002). Adherence to exercise prescriptions: effects of prescribing moderate versus higher levels of intensity and frequency. *Health Psychol*, 21(5), 452-458. PMID: 12211512
2. Larson-Meyer, E.D., Heilbronn, L.K., Redman, L.M., Newcomer, B.R., Frisard, M., Anton, S.D., Smith, S.R., Alfonso, A., Ravussin, E. (2006). Effect of calorie restriction with or without exercise on insulin sensitivity, beta-cell function, fat cell size and ectopic lipid in overweight subjects. *Diabetes Care*, 29(6), 1337-1344. PMCID: PMC2677812
4. Anton, S.D., Han, H., York, E., Martin, C.K., Ravussin, E., Williamson, D.A. (2009). Effect of calorie restriction on subjective ratings of appetite. *J Hum Nutr Diet*, 22(2), 141-147. PMCID: PMC2712828
5. Marzetti, E., Wohlgemuth, S. E., Anton, S.D., Bernabei, R., Carter, C., Leeuwenburgh, C. (2009). Cellular mechanisms of cardioprotection by calorie restriction: State of the science and future perspectives. *Clinics in Geriatric Medicine*, 25(4), 715-732. PMCID: PMC2786899
6. Wohlgemuth, S.E., Lees, H.A., Marzetti, E., Manini, T.M., Aranda, J. M., Daniels, M.J., Pahor, M., Perri, M.G., Leeuwenburgh, C., Anton, S.D. (2011). An exploratory analysis of the effects of a weight loss plus exercise program on cellular quality control mechanisms in older overweight women. *Rejuvenation Res*. 14(3), 315-24. PMCID: PMC3136739
7. Nocera, J., Buford, T., Manini, T.M., Naugle, K., Leeuwenburgh, C., Pahor, M., Perri, M.G., Anton, S.D. (2011). The impact of behavioral intervention on obesity mediated declines in mobility function: Implications for longevity. *J Aging Res*, 2011, 392510. PMCID: PMC3195552
8. Bray, G.A., Smith, S.R., DeJonge, L., de Souza, R., Rood, J., Champagne, C.M., Laranjo, N., Carey, V., Obarzanek, E., Loria, C.M., Anton, S.D., Ryan, D.H., Greenway, F.L., Williamson, D.A., Sacks, F.M. (2012). Effect of diet composition on energy expenditure during weight loss: The POUNDS LOST Study. *Int J Obes (Lond)*, 36(3), 448-455. PMCID: PMC3289771
9. Anton, S.D., Heekin, K., Simkins, C., Acosta, A. (in press). Differential effects of adulterated versus unadulterated forms of linoleic acid on cardiovascular health. *Journal of Integrative Medicine*.
10. Manini, T.M., Lott, D., Vandenborne, K., Buford, T., Knaggs, J., Leeuwenburgh, C., Pahor, M., Perri, M.G., Anton, S.D. (in press). Body composition changes with weight loss and exercise in older obese women with mild physical impairments. *Journal of Gerontology Medical Sciences*.

D. Research Support

Ongoing

1K23AT004251

Anton (PI)

12/01/08 – 11/30/13

NIH/NCCAM

Investigations of Botanicals on Food Intake, Satiety, and Weight Loss

NCT00799617	Pahor (PI)	05/15/09 – 05/15/15
NIA		

This study will test the hypotheses that testosterone treatment of elderly men whose serum testosterone concentrations are unequivocally low – and who have symptoms and objectively measured abnormalities in at least one of four areas that could be due to low testosterone (physical, sexual, or cognitive function, or vitality) – will result in more favorable changes in those abnormalities than placebo treatment.

1 U01 AG022376 (Pahor) NIH/NIA	Pahor (PI)	9/1/2011-11/30/2015

The major goal of this project is to assess whether a physical activity intervention prevents mobility disability in older persons.

1 P30 AG028740-01 NIH/NIA	Pahor (PI)	6/1/2012 – 3/31/2017

The major goals of this program are to assess the mechanisms leading to sarcopenia and functional decline, and to develop and test interventions for the treatment and prevention of physical disability in older adults.

(No Grant Number)	Anton (PI)	07/01/08 - 06/30/10
University of Florida Institute on Aging		

(No Grant Number)	Manini (PI); Anton (Co-I)	01/01/09 – 12/31/09

(No Grant Number)	Anton (Dual-PI)	02/01/08-12/31/11

(No Grant Number)	Shapiro (PI); Anton (Co-I)	01/1/08 – 01/01/09

Synergistic Effect of Leptin and Wheel Running.

This study will test the effectiveness of a novel treatment, leptin plus wheel running, for improving body weight management, body composition, sarcopenia and physical performance in older, obese rats.

(No Grant Number)

Anton (PI)

08/01/07 – 01/31/09

Institute on Aging

Biological Effects of Weight Loss Plus Exercise

This pilot study will test the potential synergistic effects of caloric restriction plus exercise (CR +EX) on inflammation, oxidative stress, apoptosis, muscle composition, and physical functioning in obese older adult women.

(No Grant Number)

Anton (PI)

09/01/05 – 09/01/08

Study jointly funded by Botanical Center & the Division of Clinical Obesity of the Pennington Biomedical Research Center.

Effects of Stevia on Food Intake, Satiety, and Insulin Levels in Overweight Adults

This peer-reviewed grant award examined whether preloads of stevia, sucrose, or aspartame affect food intake, food cravings, eating attitudes, and satiety in healthy, overweight and/or obese, adult men and women.

BIOGRAPHICAL SKETCH

NAME Buford, Thomas W.		POSITION TITLE Assistant Professor Director, Health Promotion Center	
eRA COMMONS USER NAME tbuford			
EDUCATION/TRAINING			
INSTITUTION AND LOCATION	DEGREE	YEAR(s)	FIELD OF STUDY
Oklahoma Baptist University	BSE	2000-2004	Social Science
Oklahoma State University	MS	2004-2006	Exercise Physiology
Baylor University	PhD	2006-2009	Health Sciences (Interdisciplinary)
University of Florida	Scholar	2009-2011	Geriatrics/Clinical & Translational Science

A. Personal Statement

I am pleased to continue in the ranks of our NIA-funded predoctoral training program as a "Mentor in Training. I am a scientist within the Clinical and Translational Science Institute as well as the Claude D. Pepper Older Americans Independence Center (OAIC) at the University of Florida. Over the past two years, these entities have provided me with formal education and research training in how to conduct clinical and translational research — particularly with older adults. Originally trained in exercise and skeletal muscle physiology, my experiences at the UF have provided me with the knowledge base and skill set to apply my background to more medically-relevant conditions. The focus of the OAIC is on finding methods to attenuate sarcopenia and physical disability among older adults. I intend to utilize the training and collaborative opportunities I have received to build an independently-funded clinical translational research program directed at preventing physical disability and improving quality of life for older adults. One objective of my program of research is to investigate the causes of exacerbated functional decline among older adults with diabetes.

B. Positions and Honors

Positions and Employment

2012-	Director, Health Promotion (Research) Center, Institute on Aging, Univ. of Florida
2012-	Assistant Professor, Dept. of Aging and Geriatric Research, Univ. of Florida
2012-	Adjunct Assistant Professor, Dept. of Applied Physiology and Kinesiology, College of Health and Human Performance, Univ. of Florida
2009-2011	Research Associate and Lecturer, Dept. of Aging and Geriatric Research, College of Medicine, Univ. of Florida
2006-2009	Research Assistant, Exercise and Biochemical Nutrition Laboratory, Baylor Univ.
2004-2006	Research Assistant, A.B. Harrison Human Performance Laboratory, Oklahoma State Univ.

Other Experience and Professional Memberships

2010	Ad Hoc Grant Review: UK Medical Research Council
2012	Ad Hoc Grant Review: South African Medical Research Council
2012	Member: Clinical and Population Innovative Research Grants Review Committee American Heart Association
2003-2010	Member: National Strength and Conditioning Association
2004-	Member: American College of Sports Medicine
2007-	Member: American Physiological Society
2009-	Member: Gerontological Society of America Health Sciences Section

2010- Member: American Diabetes Association
 2011- Member: American Heart Association
 Council on Nutrition, Physical Activity, and Metabolism

Selected Honors

2013 Selected Attendee, University of Michigan OAIC Annual Research Retreat
 2010 Travel Scholarship, Claude D. Pepper Older Americans Independence Centers
 National Meeting
 2009 Outstanding Doctoral Student in Exercise, Nutrition, and Preventative Health, Baylor Univ.
 2009 Student Manuscript Award, Texas Chapter, American College of Sports Medicine
 2007 Challenge Scholarship, National Strength and Conditioning Association
 2006 Graduate Research Excellence Award, Oklahoma State Univ.
 2004 Summa Cum Laude graduate, Oklahoma Baptist Univ.

C. Selected peer-reviewed publications (of 36 peer-reviewed publications)

Most Relevant to the Current Application

1. TW Buford, TM Manini, FC Hsu, M Cesari, SD Anton, S Nayfield, RS Stafford, TS Church, M Pahor, CS Carter, for the LIFE Research Group. ACE inhibitor use by older adults is associated with improved functional responses to exercise. *J Am Geriatr Soc.* 60(7): 1244-1252. 2012. PMID: 2272632.
2. E Marzetti, R Calvani, J DuPree, HA Lees, S Giovannini, D Seo, TW Buford, K Sweet, D Morgan, KYE Strehler, D Diz, SE Borst, M Moninga, K Krotova, CS Carter. Late-life enalapril administration induces nitric oxide-dependent and independent metabolic adaptations in the rat skeletal muscle. *AGE*. Epub May 26, 2012. PMID: 22639176.
3. CS Carter, S Giovaninni, D Seo, J DuPree, D Morgan, HY Chung H Lees, M Daniels, G Hubbard, S Lee, Y Ikeno, T Foster, TW Buford, E Marzetti. Differential effects of enalapril and losartan on body composition and indices of muscle quality in aged male Fischer 344 x Brown Norway rats. *AGE*. 2011 Jun;33(2):185. PMID: 21153712.
4. KA Larkin, RG MacNeil, M Dirain, B Sandesara, TM Manini, TW Buford. Blood Flow Restriction Enhances Post-Resistance Exercise Angiogenic Gene Expression. *Med Sci Sports Exerc.* 44(11): 2077-2083. PMID: 22677927.
5. TW Buford, MD Roberts, TS Church. Toward exercise as personalized medicine. *Sports Med.* 43(3): 157-165. 2013. PMID: 23382011.

Other Relevant Publications

6. TM Manini, JF Yarrow, TW Buford, BC Clark, CF Conover, SE Borst. Growth hormone responses to acute resistance exercise with vascular restriction in young and old men. *Growth Horm IGF Res.* 22(5):167-172. 2012. PMID: 22727808
7. TW Buford, MB Cooke, DS Willoughby. Resistance Exercise-Induced Changes of Inflammatory Gene Expression within Human Skeletal Muscle. *Eur J Appl Physiol.* 107(4): 463-471. 2009. PMID: 19669788
8. TW Buford, SJ Rossi, DB Smith, A Warren. A comparison of periodization models during nine weeks with equated volume and intensity for strength. *J. Strength Cond. Res.* 21(4): 1245-1250. 2007. PMID: 18076234
9. E Marzetti, SE Wohlgemuth, HA Lees, TM Manini, TW Buford, JM Aranda, R Calvani, G Capuani, M Marsiske, R Bernabei, M Pahor, C Leeuwenburgh. Skeletal muscle apoptotic signaling predicts thigh muscle volume and gait speed in community-dwelling older persons: an exploratory study. *PLoS ONE.* 7(2): e32829. 2012. PMID: 22389725.
10. TW Buford, DJ Lott, E Marzetti, SE Wohlgemuth, K Vandenborne, M Pahor, C Leeuwenburgh, TM Manini. Age-related differences in Lower Extremity Tissue Compartments and Associations with Physical Function in Older Adults. *Exp Gerontol.* 47(1): 38-44. 2012. PMID: 22015325
11. AM Joseph, PJ Adhihetty, TW Buford, SE Wohlgemuth, HA Lees, LMD Nguyen, JM Aranda, B Sandesara, M Pahor, TM Manini, E Marzetti, C Leeuwenburgh. The impact of aging on mitochondrial function and

biogenesis pathways in skeletal muscle of sedentary high- and low-functioning elderly individuals. *Aging Cell*. 11(5): 801-809. 2012. PMID: 22681576

12. TW Buford, SD Anton, AR Judge, E Marzetti, SE Wohlgemuth, CC Carter, C Leeuwenburgh, M Pahor, TM Manini. Models of Accelerated Sarcopenia: Critical Pieces for Solving the Puzzle of Age-Related Muscle Atrophy. *Ageing Res Rev*. 9(4): 369-383. 2010. PMID: 20438881

13. TW Buford, MB Cooke, BD Shelmadine, GM Hudson, LL Redd, DS Willoughby. Differential gene expression of FoxO1, ID1, and ID3 between young and older men and associations with muscle mass and function. *Aging Clin Exper Res*. 23(3): 170-174. 2011. PMID: 21993163.

14. TW Buford, MB Cooke, TM Manini, C Leeuwenburgh, DS Willoughby. Effects of Age and Sedentary Lifestyle on Skeletal Muscle NFkB Signaling in Males. *J Gerontol A Biol Sci Med Sci*. 65(5): 532-537. 2010. PMID: 20045871

15. TW Buford, MB Cooke, BD Shelmadine, GM Hudson, L Redd, DS Willoughby. Effects of Eccentric Treadmill Exercise on Inflammatory Gene Expression in Human Skeletal Muscle. *Appl Physiol Nutr Metab*. 34(4):745-753. 2009. PMID: 19767811

D. Research Support

Ongoing

2P30AG028740 (Pahor) 4/1/2012 – 3/31/2017

NIH/NIA

Claude D. Pepper Older Americans Independence Center (OAIC)

The major goals of this program are to assess the mechanisms leading to sarcopenia and functional decline, and to develop and test interventions for the treatment and prevention of physical disability in older adults.

Roles: Co-Investigator, Clinical Translational Research Core

Junior Scholar, Research Career Development Core

1U01AG022376-01 (Pahor) 09/01/09 – 08/31/15

NIH/NIA

Physical exercise to prevent disability – LIFE

The major goal of this project is to determine by conducting a Phase 3 randomized, controlled trial (RCT) whether physical exercise prevents major mobility disability in older persons.

Role: Co-Investigator

1P30AG028740-S (Leeuwenburgh) 4/1/2007 – 3/31/2013

NIH/NIA

Skeletal Muscle Apoptosis and Physical Performance, Oxidative RNA/DNA Damage and Repair in Aged Human Muscle

The major goal of this longitudinal study is to assess the role of myocellular apoptosis and RNA/DNA damage in the progression of human sarcopenia.

Role: Co-PI

Completed (last three years)

1KL2RR029888-S (Buford) 8/16/09-8/15/12

NIH/NCRR

KL2 Scholar Award: Role of Skeletal Muscle Blood Flow in Regeneration and Sarcopenia

The major goal of this award is to advance the PI's potential as a biomedical scientist by providing protected time to complete post-graduate coursework and seed funding to initiate a research program.

Role: Principal Investigator

1P30AG028740 (Pahor) 4/1/2007 – 3/31/2012

NIH/NIA

Claude D. Pepper Older Americans Independence Center (OAIC)

The major goals of this program are to assess the mechanisms leading to sarcopenia and functional decline, and to develop and test interventions for the treatment and prevention of physical disability in older adults.

Role: Co-Investigator, Clinical Research Core
Junior Scholar, Research Career Development Core

Proposal 37268 (Buford) 11/31/09-11/30/11

Merck and Co., Inc.

Role of Skeletal Muscle Blood Flow in Regeneration and Sarcopenia

This overall goal of this investigator-initiated project is to find novel biomarkers, specifically focused on muscle regenerative capacity, as targets for novel therapeutic interventions to combat sarcopenia.

Role: Principal Investigator

No grant # assigned (Buford) 3/31/10-4/20/11

American College of Sports Medicine

Graded Vascular Occlusion and KAATSU Exercise on Skeletal Muscle Regenerative Signaling

The overall goal of this pilot project was to compare the molecular changes induced in skeletal muscle following resistance exercise combined with blood flow restriction to changes following standard resistance exercise.

Role: Principal Investigator

1P30AG028740-S (Manini) 4/1/2009-3/31/2010

NIH/NIA

Molecular mechanisms of skeletal muscle loss in HIV-infected older persons (OAIC supplement)

The overall goal of this project is to evaluate the feasibility of conducting a case-control study to identify disease-specific and therapy-related factors associated with muscle fatigue and sarcopenia in older adults with HIV infection.

Role: Co-Investigator

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Vonetta M. Dotson	POSITION TITLE Assistant Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) dotsonv			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
St. Mary's University	B.A.	5/99	Psychology
University of Florida	M.S., Ph.D.	5/02, 8/06	Psychology (Clinical)
James A. Haley Veterans Hospital	N/A	7/06-8/06	Predoctoral Internship
NIA Intramural Research Program	Postdoctoral	8/06-7/09	Cognitive Neuroscience of Aging and Depression

A. Personal Statement

Vonetta Dotson will continue to serve as a mentor in training on the proposed T32 program. She is an early graduate of this training program.

Vonetta Dotson is an Assistant Professor in the Department of Clinical and Health Psychology at the University of Florida (UF) and an Affiliated Faculty in the Department of Neuroscience at UF. She received her Ph.D. from the same department in 2006 with a specialization in neuropsychology and a certificate in gerontology. She completed her postdoctoral training in the Laboratory of Personality and Cognition in the National Institute on Aging Intramural Research Program under the mentorship of Drs. Susan Resnick and Alan Zonderman. Her research focuses on studying the interaction of psychological disorders such as depression with cognitive and brain aging using both neuroimaging and behavioral techniques. Her work includes studies of both normal and pathological aging, such as Parkinson's disease and dementia. Her more recent work focuses on the impact of aerobic exercise on depression-related cognitive and brain changes in older adults. She is currently mentoring a second-year graduate student and three undergraduate students in her laboratory.

B. Positions and Honors

Positions

2006-2009	Postdoctoral Fellow, Laboratory of Personality and Cognition, National Institute on Aging Intramural Research Program, Baltimore, MD
8/2009-present	Assistant Professor, Department of Clinical and Health Psychology, University of Florida, Gainesville, FL

Honors

1997	ACCD Foundation Scholars Award
1997-1999	Dean's List, St. Mary's University
1998-1999	The National Dean's List
2000-2004	University of Florida Graduate Minority Fellowship
2003-2005	University of Florida Institute on Aging Trainee
2004-2005	National Institute on Aging funded Predoctoral Fellow
2004	Recipient of National Institute on Aging Technical Assistance Workshop travel fellowship
2005	Accepted into the Society for Neuroscience's Neuroscience Scholars Program

2006	Accepted to attend the American Psychological Association's Advanced Training Institute on Functional Magnetic Resonance Imaging
2006	Recipient of the Institute for Learning in Retirement Graduate Aging Research Award
2007	Accepted to attend the American Psychological Association's Advanced Training Institute on Structural Equation Modeling for Longitudinal Research
2007	Recipient of National Institute on Aging Summer Institute on Aging Research travel fellowship
2010	Claude D. Pepper Affiliated Scholar
2012	Claude D. Pepper Scholar

Licensure: Licensed psychologist, State of Florida, License No. PY 8055

Professional Memberships: Society for Neuroscience, International Neuropsychological Society, American Psychological Association

C. Peer-reviewed publications or manuscripts in press (in chronological order)

1. Perlstein, W.M., Larson, M.J., Dotson, V.M., & Kelly, G.K. (2006). Temporal dissociation of components of cognitive control dysfunction in severe TBI: ERPs and the cued-Stroop task. *Neuropsychologia*, 44(2), 260-274. PMID: 15979655
2. Larson, M.J., Perlstein, W.M., Stigge-Kaufmann, D., Kelly, G.K., & Dotson, V.M. (2006). Affective context induced modulation of the error-related negativity. *Neuroreport*, 17(3), 329-33. PMID: 16462607
3. Dotson, V.M., Singletary, F.S., Fuller, R., Koehler, S., Bacon Moore, A., Rothi, L.J.G., & Crosson, B. (2008). Treatment of word-finding deficits in fluent aphasia through the manipulation of spatial attention: Preliminary findings. *Aphasiology*, 22(1), 103-113.
4. Dotson, V.M., Schinka, J.A., Brown, L., Borenstein, A.R., & Mortimer, J.A. (2008). Characteristics of the Florida Cognitive Activities Scale in older African Americans. *Assessment*, 15(1), 72-77. PMID: 18258733
5. Dotson, V.M., Resnick, S.M., & Zonderman, A.B. (2008). Differential Association of Baseline, Concurrent, and Chronic Depressive Symptoms with Cognitive Decline in Older Adults. *American Journal of Geriatric Psychiatry*, 16, 318-330. PMID: 18378557
6. Dotson, V.M., Kitner-Triolo, M., Evans, M.K., & Zonderman, A.B. (2008). Literacy-based normative data for low socioeconomic status African Americans. *The Clinical Neuropsychologist*, 22, 989-1017. PMID: 18609322
7. Pedraza, O., Dotson, V.M., Willis, F.B., Graff-Radford, N.R., and Lucas, J.A. (2009). Internal Consistency and Test-Retest Reliability of the Geriatric Depression Scale-Short Form in African American Older Adults. *Journal of Psychopathology and Behavioral Assessment*, 31(4), 412-416. PMID: 20161488
8. Dotson, V.M., Kitner-Triolo, M., Evans, M.K., & Zonderman, A.B. (2009). Effects of Race and Socioeconomic Status on the Relative Influence of Education and Literacy on Cognitive Functioning. *JINS*, 15, 580-589. PMID: 19573276
9. Dotson, V.M., Beason-Held, L., Kraut, M.A., & Resnick, S.M. (2009). Longitudinal Study of Chronic Depressive Symptoms and Regional Cerebral Blood Flow in Older Men and Women. *International Journal of Geriatric Psychiatry*, 24(8), 809-19. PMID: 19484709
10. Dotson, V.M., Davatzikos, C., Kraut, M.A., & Resnick, S.M. (2009). Depressive Symptoms and Brain Volumes in Older Adults: A Longitudinal MRI Study. *Journal of Psychiatry and Neuroscience*, 34(5), 367-375. PMID: 19721847
11. Dotson, V.M., Zonderman, A.B., Davatzikos, C., Kraut, M.A., & Resnick, S.M. (2009). Frontal Atrophy and Immediate Memory Deficits in Older Adults with a History of Elevated Depressive Symptoms. *Brain Imaging and Behavior*, 3, 358-369. PMID: 20161651
12. Dotson, V.M., Baydoun, M.A., & Zonderman, A.B. (2010). Recurrent depressive symptoms and the incidence of dementia and MCI. *Neurology*, 75, 27-34. PMID: 20603482

13. Sutin, A. R., Beason-Held, L. L., Dotson, V. M., Resnick, S. M., & Costa, P. T. (2010). The neural correlates of neuroticism differ by sex and prospectively mediate depressive symptoms among older women. *Journal of Affective Disorders*, 127, 241-7. PMID: 20599276
14. Goveas, J.S., Espeland, M.A., Hogan, P., Dotson, V., Tarima, S., Coker, L.H., Ockene, J., Brunner, R., Woods, N.F., Wassertheil-Smoller, S., Kotchen, J.M., Resnick, S. (2011). Depressive symptoms, brain volumes and subclinical cerebrovascular disease in postmenopausal women: the Women's Health Initiative MRI Study. *Journal of Affective Disorders*, 132, 275–284. PMID: 21349587
15. Dotson, V.M., Sozda, C.N., Marsiske, M., & Perlstein, W.M. (2012). Within-session Practice Eliminates Age Differences in Cognitive Control. *Aging, Neuropsychology and Cognition: A Journal on Normal and Dysfunctional Development*, DOI:10.1080/13825585.2012.736469.
16. Dotson, V.M., Zonderman, A.B., Kraut, M.A., & Resnick, S.M. (2013). Temporal Relationships between Depressive Symptoms and White Matter Hyperintensities in Older Men and Women. *International Journal of Geriatric Psychiatry*, 28, 66–74. DOI: 10.1002/gps.3791.

D. Research Support

Physical, Cognitive and Mental Health in Social Context

Principal Investigator: Michael Marsiske, Ph.D.

5T32AG020499-07

NIH/NIA

Role: Research Fellow/Trainee

2004 - 2005

Double Jeopardy: Cognitive Decline in Depression and Aging

Principal Investigator: Vonetta M. Dotson

AG024539-01

NIH/NIA

Role: PI

9/04 - 6/06

Effect of Exercise on Memory in Geriatric Depression: An fMRI Pilot Study

Principal Investigator: Vonetta M. Dotson

McKnight Brain Research Foundation

Role: PI

3/11-8/13

Lifestyle Interventions and Independence for Elders (LIFE) Study

Principal Investigator: Marco Pahor

U01 AG022376

NIH/NIA

Role: PI for Diversity Supplement

2/12-2/14

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Natalie C. Ebner	POSITION TITLE Assistant Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) NATALIE.EBNER			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Free University Berlin, Berlin, Germany	B.A.	04/1998	Psychology
Free University Berlin, Berlin, Germany	M.A.	03/2001	Psychology
Free University Berlin & Max Planck Institute for Human Development, Berlin, Germany	Ph.D.	04/2005	Psychology
Max Planck Institute for Human Development, Berlin, Germany	Postdoctoral	06/2007	Psychology
Yale University, New Haven, USA	Postdoctoral	07/2010	Psychology

A. Personal Statement

I am pleased to join the T32 as a Mentor in Training, which will allow me to serve as Primary Mentor for trainees, as long as I am joined by a senior co-chair. My laboratory already includes several doctoral students with strong aging interests.

My research focuses on how socially relevant information biases attention and memory in adults of different ages, and why. People attend more to some information and remember better some of their experiences. This ability to focus on, and remember, critical elements of the environment represents an essential mechanism for adaptive behavior and psychological well-being in a complex environment. I am particularly interested in examining how information related to one's own age and information related to goals and agendas as two types of socially and self relevant information affect attention and memory, how such top-down influences on attention and memory interact with bottom-up influences such as the emotional content of the information, and how this influence changes across the lifespan. I use a multi-methods approach in my research that combines convergent measures, including self-report, behavior observation, eye tracking, and functional neuroimaging techniques (fMRI, ERP), with the aim to integrate introspective, behavioral, and neuropsychological data. Specific interests are: (1) Development and interplay of motivational, emotional, and cognitive processes across the lifespan; (2) Goal selection and goal pursuit as processes of developmental regulation; (3) Approach and avoidance orientation in adulthood; (4) Lifespan changes in cognitive processing of socially relevant information; (5) Age-related differences in perception of, attention to, and memory for human faces

B. Positions and Honors

Positions

2001-2005	Predoctoral Fellow, Free University Berlin & Max Planck Institute for Human Development, Berlin, Germany
2005-2007	Postdoctoral Fellow, Max Planck Institute for Human Development, Berlin, Germany
2007-2010	Postdoctoral Fellow, Department of Psychology, Yale University, New Haven, USA
2010-2011	Associate Research Scientist, Department of Psychology, Yale University, New Haven, USA
08/2011-present	Assistant Professor, Department of Psychology, University of Florida, Gainesville, USA

Other Experience and Professional Memberships

2000-2012	Member, German Psychological Association
2003-	Member, American Psychological Association
2003-	Member, Society for Personality and Social Psychology
2008-2012	Member, Association for Psychological Science
2008-	Member, Social and Affective Neuroscience Society

2010-	Member, Society for Social Neuroscience
2012-	Member, Society for Cognitive Neuroscience
2009	Reviewer for Retirement Research Foundation Doctoral Dissertation Award in the Psychology of Aging (American Psychological Association)
2012	Reviewer for the Swiss National Fond
2012	Early Career Reviewer (ECR) at the Center for Scientific Review (CSR), National Institute of Health

Awards/Grants

2003	Student Research Award, American Psychological Association (Division 20),
2004	Graduate Student Poster Award, Society for Personality and Social Psychology
2006	Heinz-Heckhausen-Jungwissenschaftlerpreis (Young Research Scientist Award), German Psychological Association

C. Selected Peer-reviewed Publications

Most relevant to the current application (in chronological order)

- (1) **Ebner, N. C.**, Maura, G., MacDonald, K., Westberg, L., & Fischer, H. (2013). *Effects of oxytocin on socioemotional aging – Current knowledge and future trends*. Manuscript submitted to *Frontiers in Human Neuroscience*.
- (2) **Ebner, N. C.**, Johnson, M. R., Rieckmann, A., Durbin, K., Johnson, M. K., & Fischer, H. (in press). Processing own-age vs. other-age faces: Neuro-behavioral correlates and effects of emotion. *NeuroImage*.
- (3) **Ebner, N. C.**, Johnson, M. K., & Fischer, H. (2012). Neural mechanisms of reading facial emotions in young and older adults. *Frontiers in Psychology*, 3(223), 1-19. DOI: 10.3389/fpsyg.2012.00223.
- (4) **Ebner, N. C.**, Gluth, S., Johnson, M. R., Raye, C. L., Mitchell, K. M., & Johnson, M. K. (2011). Medial prefrontal cortex activity when thinking about others depends on their age. [Special issue] *Neurocase*, 17, 260-269. DOI:10.1080/13554794.2010.536953. NIHMS ID: NIHMS251257
- (5) **Ebner, N. C.**, He, Y., Fichtenholtz, H. M., McCarthy, G., & Johnson, M. K. (2010). Electrophysiological correlates of processing faces of younger and older individuals. *Social Cognitive and Affective Neuroscience*. Advance online publication. DOI:10.1093/scan/nsq074. PMC Journal -- in process
- (6) **Ebner, N. C.**, He, Y., & Johnson, M. K. (2011). Age and emotion affect how we look at a face: Visual scan patterns differ for own-age versus other-age emotional faces. [Special section] *Cognition & Emotion*. Advance online publication. DOI:10.1080/02699931.2010.540817. NIHMS ID: NIHMS303333
- (7) Riediger, M., Voelkle, M., **Ebner, N. C.**, & Lindenberger, U. (2011). Beyond "happy, angry, or sad?": Age-of-poser and Age-of-rater effects on multi-dimensional emotion perception. [Special section] *Cognition & Emotion*. Advance online publication. DOI:10.1080/02699931.2010.540812
- (8) **Ebner, N. C.**, & Johnson, M. K. (2010). Age-group differences in interference from young and older emotional faces. *Cognition & Emotion*, 24, 1095-1116. DOI:10.1080/02699930903128395. PMCID: PMC3030265
- (9) **Ebner, N. C.**, Riediger, M., & Lindenberger, U. (2010). FACES—A database of facial expressions in young, middle-aged, and older women and men: Development and validation. *Behavior Research Methods*, 42, 351-362. DOI:10.3758/BRM.42.1.351. PMID: 20160315
- (10) **Ebner, N. C.**, & Johnson, M. K. (2009). Young and older emotional faces: Are there age-group differences in expression identification and memory? *Emotion*, 9, 329-339. DOI: 10.1037/a0015179. PMCID: PMC2859895
- (11) Mitchell, K. J., Raye, C. L., **Ebner, N. C.**, Tubridy, S. M., Frankel, H., & Johnson, M. K. (2009). Age-group differences in medial cortex activity associated with thinking about self-relevant agendas. *Psychology and Aging*, 24, 438-449. DOI:10.1037/a0015181. PMCID: PMC2859896
- (12) **Ebner, N. C.** (2008). Age of face matters: Age-group differences in ratings for young and old faces. *Behavior Research Methods*, 40, 130-136. DOI:10.3758/BRM.40.1.130. PMID: 18411535

Additional recent publications of importance to the field (in chronological order)

- (1) Voelkle, M. C., **Ebner, N. C.**, Lindenberger, U., & Riediger, M. (2013). Here we go again: Anticipatory and reactive mood responses to recurring unpleasant situations throughout adulthood. *Emotion*. Epub ahead of print.
- (2) West, R. L., **Ebner, N. C.**, & Hastings, E. C. (2012). Linking goals and aging: Experimental and life-span approaches. In E. A. Locke & G. P. Latham (Eds.), *New developments in goal setting and task performance*. London, UK: Routledge Academic.
- (3) Voelkle, M. C., **Ebner, N. C.**, Lindenberger, U., & Riediger, M. (2011). Let me guess how old you are: Effects of age, gender, and facial expression on perceptions of age. *Psychology & Aging*. Advance online publication. DOI: 10.1037/a0025065. PMID: 21895379
- (4) Gluth, S., **Ebner, N. C.**, & Schmiedek, F. (2010). Attitudes toward younger and older adults: The German Aging Semantic Differential. *International Journal of Behavioral Development*, 34, 147-158. DOI:10.1177/0165025409350947.
- (5) **Ebner, N. C.**, Riediger, M., & Lindenberger, U. (2009). Schema reliance for developmental goals increases from early to late adulthood: Improvement for the young, loss prevention for the old. *Psychology and Aging*, 24, 310-323. DOI:10.1037/a0015430. PMID: 19485650
- (6) **Ebner, N. C.**, Freund, A. M., & Baltes, P. B. (2006). Developmental changes in personal goal orientation from young to late adulthood: From striving for gains to maintenance and prevention of losses. *Psychology and Aging*, 21, 664-678. DOI:10.1037/0882-7974.21.4.664. PMID: 17201488

D. Ongoing Research Support

Department of Psychology 2011 Michael L. & Judith D. Woodruff Research Competition Grant
Ebner (PI; 5%)

08/15/11-06/02/13 (\$6,000)

Neural mechanisms of social memory in young and older adults

The goal of this project is to determine the neural correlates for older adults' increased schema reliance and to examine whether self-relevance of information counteracts memory biases arising from schemas.

University of Florida Clinical and Translational Science Institute (CTSI) Pilot Project Award (sponsor: NIH/NCATS Clinical and Translational Science Award to the University of Florida UL1 TR000064)
Ebner (PI; 15%)

01/01/13-12/31/13 (\$20,000)

Neuro-behavioral effects of oxytocin on decisions of trust in aging

The goal of this project is to determine neuroendocrine and socio-behavioral effects of oxytocin on decisions of trust in aging.

Completed Research Support

DFG EB 436/1-1 (sponsor: German Science Foundation)

Ebner (PI; 100%)

07/01/07-06/30/10

Motivational orientation in adulthood

The goal of this project was to assess behavioral and neural correlates of age-related differences in processing motivationally and socially relevant information

BIOGRAPHICAL SKETCH

NAME Manini, Todd M.		POSITION TITLE Assistant Professor	
eRA COMMONS USER NAME tmanini			
EDUCATION/TRAINING			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
Ohio University, Athens, OH	BS	05/97	Biology
Syracuse University, Syracuse, NY	MS	05/00	Exercise Physiology
Syracuse University, Syracuse, NY	Ph.D.	12/04	Exercise Physiology
National Institute on Aging	Fellowship	12/06	Epidemiology

A. Personal Statement

Dr. Manini will continue in his role as a “Mentor in Training” for this T32 predoctoral program. He has a well-rounded background in Exercise Physiology, Epidemiology and Gerontology that provide him the necessary expertise to contribute to training. He completed his graduate degree in Exercise Physiology at Syracuse University and was a fellow at the NIA Intramural Laboratory of Epidemiology, Demography and Biometry. He was mentored by Dr. Tamara Harris, a leading NIH-funded researcher in the area of metabolic indicators for prevention of physical and cognitive disability in older adults. His long-term interest relates to interventions for the preservation of physical and cognitive function to prevent physical disability across the lifespan. He will provide scientific and administrative support to the research team; and will have a shared responsibility for overseeing the study progress; study assessments, safety and data collection. He has specific expertise in conducting studies in older adults (Manini et al. 2009, Manini, Clark et al. 2007, Manini, Marko et al. 2007 and Clark, Manini et al. 2006). He leads the collection of accelerometry data in as part of his role on the LIFE study administrative coordinator center (ACC). He has been instrumental in creating the accelerometry MOP that ensures excellent compliance and high quality data according to standardized methods. Additionally, he has specific interest in understand idiopathic fatigue in older persons was awarded an NIH award to conduct research to understand biological correlates (see biosketch: *Mitochondrial function in fatigue in elders*). Manini serves as a primary mentor for Torrance Higgins, a currently funded T32 trainee.

B. Positions and Honors

Positions and Employment

1997-2001	Graduate assistant, Syracuse University, Syracuse, NY
2002-2003	Adjunct faculty, Syracuse University, Syracuse, NY
2003-2004	Graduate Student Fellowship, Syracuse University, Syracuse, NY
2004-2006	Post-Doctoral Fellowship, National Institute on Aging
2006-2007	Research Assistant Professor, University of Florida, Gainesville, FL
2007-	Assistant Professor, University of Florida, Gainesville, FL
2008-	Adjunct Assistant Professor, Department of Applied Physiology & Kinesiology
2009-	Adjunct Assistant Professor, Department of Epidemiology and Biostatistics
2012	American College of Sports Medicine: Committee member of the Strategic Health Initiative on Aging in Exercise Science and Sports Medicine

Other Experience and Professional Memberships

Referee: Journal of the American Medical Association (JAMA), Journal of Physiology, Journals of Gerontology: Biological & Medical Science, Journal of the American Geriatrics Society, Biomed Central: Geriatrics, British Medical Journal, Aging Clinical and Experimental Research, Medicine Science in Sports and Exercise, AJP:

Regulatory, Integrative and Comparative Physiology, International Journal of Sport Psychology.

Member: Gerontological Society of America, American Physiological Society, American College of Sports Medicine

Study section member: 2007 ZAG1 ZIJ-7 NIA Thrombosis RFA review, ARRA stage 1 grant reviewer

Grant reviewer: Longevity Consortium

Symposia Chair: Gerontological Society of America and American College of Sports Medicine

Additional Training: Genetics and genomics strategies in aging research workshop (2007), Bench to Bedside Idiopathic fatigue and aging (2008), Mitochondrial Respirometry (2009)

Honors

5/05 Maxwell School of Citizenship and Public Affairs: Certificate of Advanced studies in Gerontology

11/05 Gerontological Society of America: Austin Bloch Post-Doctoral Award

5/05 Syracuse University doctoral prize & Certificate of University Teaching

5/10 University of Florida Assistant Professor Excellence Award

10/11 Keynote speaker for Quebec network for research on aging. Title: Sarcopenia ≠ Dynapenia

2011 UF College of Medicine Exemplary Teachers Award

2011 Fellow of the American College of Sports Medicine

2012 CTSI: Academic Research Excellence Award

C. Selected Peer-reviewed Publications (Selected from 77 peer-reviewed publications)

Most relevant to the current application

1. Tranah GJ, **Manini TM**, Lohman KK, Nalls MA, Kritchevsky S, Newman AB, Harris TB, Miljkovic I, Biffi A, Cummings SR, Liu Y. Mitochondrial DNA variation in human metabolic rate and energy expenditure. *Mitochondrion*. 2011 Nov;11(6):855-61. Epub 2011 May 9. PubMed PMID: 21586348.2.
2. Tranah GJ, Lam ET, Katzman SM, Nalls MA, Zhao Y, Evans DS, Yokoyama JS, Pawlikowska L, Kwok PY, Mooney S, Kritchevsky S, Goodpaster BH, Newman AB, Harris TB, **Manini TM**, Cummings SR; For the Health, Aging and Body Composition Study. Mitochondrial DNA sequence variation is associated with free-living Activity energy expenditure in the elderly. *Biochim Biophys Acta*. 2012 Sep;1817(9):1691-1700. PMID: 22659402; PMCID: PMC3389152.
3. Coen PM, Jubrias SA, Distefano G, Amati F, Mackey DC, Glynn NW, **Manini TM**, Wohlgemuth SE, Leeuwenburgh C, Cummings SR, Newman AB, Ferrucci L, Toledo FG, Shankland E, Conley KE, Goodpaster BH. Skeletal Muscle Mitochondrial Energetics Are Associated With Maximal Aerobic Capacity and Walking Speed in Older Adults. *J Gerontol A Biol Sci Med Sci*. 2012 Oct 31. PubMed PMID: 23051977.
4. **Manini TM**, Newman AB, Fielding R, Blair SN, Perri MG, Anton SD, Goodpaster BC, Katula JA, Rejeski WJ, Kritchevsky SB, Hsu FC, Pahor M, King AC; LIFE Research Group.. Effect of exercise on mobility in obese and non-obese older adults. *Obesity (Silver Spring)*. 2010 Jun; 18(6): 1168-75. PMID: 19834467
5. Heffernan KS, **Manini TM**, Hsu FC, Blair SN, Nicklas BJ, Kritchevsky SB, Newman AB, Sutton-Tyrrell K, Church TS, Haskell WL, Fielding RA. Relation of Pulse Pressure to Long-Distance Gait Speed in Community-Dwelling Older Adults: Findings from the LIFE-P Study. *PLoS One*. 2012;7(11):e49544. PMID: 23185357; PMCID: PMC3503986.

Most Recent publications of importance to the field

1. **Manini TM**. Energy Expenditure and Aging. *Ageing Research Reviews*. 2010 Jan; 9(1): 1-11.
2. Joseph AM, Adihetty PJ, Buford TW, Wohlgemuth SE, Lees HA, Nguyen LM, Aranda JM, Sandesara BD, Pahor M, **Manini TM**, Marzetti E, Leeuwenburgh C. The impact of aging on mitochondrial function and biogenesis pathways in skeletal muscle of sedentary high- and low-functioning elderly individuals. *Aging Cell*. 2012 Oct;11(5):801-9. PMID: 22681576; PMCID: PMC3444680.
3. Knaggs JD, Larkin KA, **Manini TM**. Metabolic cost of daily activities and effect of mobility impairment in older adults. *J Am Geriatr Soc*. 2011 Nov; 59(11):2118-23. PMID: 22091979
4. **Manini TM**, Everhart J, Patel V, Schoeller D, Colbert L, Visser M, Tylavsky F, Bauer D, Goodpaster B,

Harris T. Daily activity energy expenditure and mortality among older adults. *JAMA*. 2006; 296:171-179. PMID: 16835422

5. **Manini TM**, Everhart JE, Patel KV, Schoeller DA, Cummings S, Mackey D, Bauer DC, Simonsick EM, Colbert LH, Visser M, Tylavsky F, Newman AB, Harris TB. Activity energy expenditure and mobility limitation in older adults: Differential associations by sex. *Am J Epidemiol*. 2009 Jun 15; 169(12): 1507-16.

6. Tranah GJ, **Manini TM**, Lohman KK, Nalls MA, Kritchevsky S, Newman AB, Harris TB, Miljkovic I, Biffi A, Cummings SR, Liu Y. Mitochondrial DNA variation in human metabolic rate and energy expenditure. *Mitochondrion*. 2011 Nov; 11(6): 855-61. PMID: 21586348.

7. Middleton LE, **Manini TM**, Simonsick EM, Harris TB, Barne, DE, Tylavsky F, Brach JS, Everhart JE, Yaffe K. Activity energy expenditure and incidence cognitive impairment in older adults. *Archives of Internal Medicine* 2011 Jul 25; 171(14): 1251-7.

8. **Manini TM** and Pahor M. Physical activity and maintaining physical function in older adults. Invited review article for *British Journal of Sports Medicine*. 2009; 43(1): 28-31. PMID: 18927164.

9. **Manini TM**, Everhart J, Bauer S, Colbert L, Cummings S, Goodpaster BH, Schoeller DA, Simonsick EM, Tylavsky F, Harris TB. Activity energy expenditure and the change in body composition during late life. *American J Clinical Nutrition*. 2009; 169(12):1507-16. PMID: 19383938.

10. **Manini TM**, Marko M, VanArnam T, Cook S, Fernhall B, Burke J, Ploutz-Snyder L. Efficacy of Resistance and task-specific exercise in older adults who modify tasks of everyday life. *J Gerontol A Biol Sci Med Sci*. 2007; 62:616-623. PMID: 17595417.

D. Research Support

Ongoing Research Support

NIH/NIA 1 UO1 AG022376-05

09/1/09-08/31/15

Lifestyle Interventions and Independence for Elders Study

This is a multi-site Phase III randomized controlled trial of physical activity to prevent major mobility disability and cognitive decline in older adults. The results from the trial will definitively determine whether a physical activity intervention conducted over 4 years can prevent many age-related disabilities.

Roles: Principal Investigator of the Florida Field Center and Co-Investigator of Administrative Coordinating Center

NIH/NHLBI Women's Health Initiative Extension Study

09/01/10-08/31/15

Contracts: N01WH22110, 24152, 32100-2, 32105-6, 32108-9, 32111-13, 32115, 32118-32119, 32122, 42107-26, 42129-32, and 44221. The primary goal of this project is to continue follow-up of the original cohort of the Women's health Initiative that began in 1994. A secondary goal is to conduct a second wave data collection surveys. Early stage investigators will be introduced to the WHI study, initiate secondary data analyses and collaborate on ancillary proposals.

Role: Co-Investigator and Early Stage Investigator (Regional PI: Shumaker; Site PI: Limacher)

NIH/NIA P30 AG028740

8/30/12-7/31/17

Claude D. Pepper Older Americans Independence Center (OAIC)

The major goals of this program are to assess the mechanisms leading to sarcopenia and functional decline, and to develop and test interventions for the treatment and prevention of physical disability in older adults.

Role: Co-Investigator (PI: Marco Pahor)

NIH/NIA 5T32AG020499

05/01/11-04/30/13

Physical, cognitive and mental health in a social context

The purpose of this program is to train predoctoral researchers in biobehavioral and social approaches to aging, and to prepare them for settings including traditional disciplinary departments, clinical research environments, and multidisciplinary gerontology programs.

Role: Primary Mentor to Torrance Higgins (PI: Marsiske)

Research Support Completed During the Last Three Years

NIH/NIA R21 AG031974-01A209 09/1/09 – 8/30/12

Task Specific Exercise for the Clinically Disabled

The major goals of this project are to determine the short and long-term responses of task-specific exercise (exercises that simulate daily living) in the pre-clinically disabled and to explore mechanisms of adaptation following task-specific exercise.

Role: Principal Investigator

American College of Sports Medicine

05/01/08-08/30/10

Paffenbarger-Blair Fund for Epidemiological Research on Physical Activity

The Epidemiology of Activity Energy Expenditure in Late-life

The purpose of this project is to develop algorithms that estimate energy expenditure using accelerometers in older adults performing daily activities.

Role: Principal Investigator

NIH/NIA 1RC2AG036594-01

10/1/09–09/30/11

Study of energy and aging

The goal is to develop a mitochondrial basis for mobility disability and fatigue in the elderly.

Role: Co-Investigator (PI: Steve Cummings)

NIH/NIA 1 P30 AG028740-S3

10/1/09-12/31/11

Mitochondrial function and fatigue in the elderly

This pilot study will supplement the current OAIC and is geared toward studying fatigue in the elderly and whether mitochondrial dysfunction contributes to the prevalence of fatigue in the elderly.

Role: Principal Investigator

The Evelyn F. and William L. McKnight Brain Institute

02/01/08-12/31/11

Resveratrol supplementation to improve memory dysfunction in older adults

This is a Phase I double-blind placebo controlled trial to determine whether three months of daily resveratrol supplementation is safe. A secondary aim is to examine efficacy on physical and cognitive function.

Role: Principal Investigator

Joint Cancer Centers Opportunity Fund

01/01/09 – 05/31/10

Chemotherapy induced muscle weakness

The major goal of this project is to determine the feasibility of and explore mechanisms causing poor physical function and quality of life in breast cancer survivors over the age 65 years

Role: Principal Investigator

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Catherine Price, PhD	POSITION TITLE Assistant Professor, Department of Clinical & Health Psychology, Joint Appointment in Dept. of Anesthesiology		
eRA COMMONS USER NAME ceprice			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(S)	FIELD OF STUDY
University of Central Florida, Orlando, FL	BS	1995	Psychology
University of Central Florida, Orlando, FL	MS	1997	Clinical Psychology
Crozer-Chester Medical Center, Upland, PA	Externship	1998-1999	Geriatric Neuropsychology
Thomas Jefferson University, Phil., PA	Externship	1998-1999	Applied Neuropsychology
University of Pennsylvania, Phil., PA	Externship	1999-2001	Cognitive Neuroscience & Clinical Neuropsychology
University of Florida, Gainesville, FL	Internship	2001-2002	Clinical Neuropsychology
Drexel University, Philadelphia, PA	PhD	2002	Clinical Psychology
University of Florida, Gainesville, FL	PostDoc	2002-2004	Neuropsychology

A. Personal Statement

My research, enthusiasm for student mentorship, and leadership experiences to date allow me to serve as a potential mentor for the exciting predoctoral training renewal application: "Physical, Cognitive and Mental Health in Social Context". My primary research aims are: *First*, to understand the relative contribution of white matter versus subcortical gray matter structure integrity on the cognitive profiles of subcortical neurodegenerative diseases (e.g., small vessel vascular dementia, Parkinson's disease). *Second*, to *apply* this knowledge towards more collaborative and longitudinal research examining the predictive value of white and gray matter structure integrity on a) disease associated cognitive decline and b) vulnerability to accelerated cognitive change after elective medical interventions (i.e., DBS; major elective surgeries). My graduate training was mentored by NIH funded investigators who were faculty within Philadelphia based universities (i.e., David Libon from Drexel University, Guila Glosser, Ph.D., ABPP/CN and Murray Grossman, M.D., Ed.D., from the University of Pennsylvania; Laura Gitlin, Ph.D., from Thomas Jefferson University). Post graduate school training was federally funded (NIH NIA F-32 AG021363-01) and mentored by NIH funded faculty within the University of Florida (Dawn Bowers, Ph.D., Neuropsychology; Christiana Leonard, Ph.D., Neuroscience; Terri Monk, M.D., Anesthesiology). Now, I am an assistant professor and complete clinical based research on Parkinson's disease and dementia. I have 35 peer reviewed published research articles examining cognitive and neuroanatomical components of cortical and subcortical dementias (papers published in Neurology, Stroke, Journal of the International Neuropsychological Society, Neuropsychology, and Neuropsychologia). I am currently completing a NINDS career award examining white matter contributions to Parkinson's disease cognitive profiles, and also conduct weekly clinical neuropsychological assessments for dementia, as well as dementia in movement disorders. I actively mentor three college undergraduate honor students, four pre-doctoral graduate students, and one clinical post-doctoral associate. As a program mentor, I will use my acquired skills and enthusiasm to ensure continued success for all trainees. I have mentored a student in the T32 program (Sandra Mitchell) who has graduated, and who is now pursuing postdoctoral training.

B. Positions and Honors

Positions

10/2005-present Assistant Professor, Dept of Clinical & Health Psychology, Dept. of Anesthesiology
 2004-2005 Research Assistant Professor

Honors

1995 Undergraduate Student of the Year, University of Central Florida
 1998 Philadelphia Neuropsychology Society President's Research Award

2002 - 2004 NIA/NIH Ruth L. Kirschstein National Research Service Award
 2003 P.E.O. Scholar Award (International Women's Educational Organization)
 2003 P.E.O. Keynote Speaker at State Convention
 2003 Selected Scholar - American Psychological Association's Advanced Training Institute in Longitudinal methods, Modeling, and Measurement
 2003, 2007 Fellowship Award from the International Society of Vascular Behavioral and Cognitive Disorders (Vas-Cog)
 2005, 2007-11 Invited Speaker to the Florida Society of Neurology
 2006, 2008 University of Florida – Undergraduate Scholar Mentor of the Year
 2009 Invited Workshop Speaker, International Neuropsychological Society
 2010 Selected Scholar – Advanced Psychometrics Methods in Cognitive Aging conference at the University of Washington Friday Harbor Laboratory
 2010 – 2012 NIH Loan Repayment Recipient
 2011 Associate Editor, Journal for the International Neuropsychological Society
 2012 UF Faculty - Research Mentorship Award; voted upon by the CHP graduate student body

Professional Memberships

American Psychological Association, International Neuropsychological Society, Vascular Behavioral and Cognitive Disorders (Vas-Cog)

C. Selected Peer-reviewed Publications

Most relevant to the current application (selected from 35 publications)

1. Price, C., Jefferson, A. J., Merino, J. G., Heilman, K., Libon, D. J. (2005). Towards an operational definition of the Research Criteria for Subcortical Vascular Dementia: Integrating neuroradiological and neuropsychological data. *Neurology*, 65(3), 376-82.
2. Nocera, J. R., Price, C. C., Fernandez, H. H., Amano, S., Vallabhajosula, S., Okun, M. S., Hwynn, N., Hass, C. J. (2010). Tests of Dorsolateral Frontal Function Correlate with Objective Tests of Postural Stability in Early to Moderate Stage Parkinson's Disease. *Parkinsonism and Related Disorders*, 16, 590-594.
3. Price, C. C., Favilla, C., Tanner, J., Towler, S., Hass, C., Foote, K., Okun, M. (2011). Lateral ventricular volume poor predictor of DBS gait and motor outcome for idiopathic Parkinson's disease. *Parkinsonism and Related Disorders*, 17, 343-347.
4. Price C, Wood MF, Leonard CM, Towler S, Ward J, Montijo H, Kellison I, Bowers D, Monk T, Newcomer JC, Schmalfluss I. Entorhinal cortex volume in older adults: reliability and validity considerations for three published measurement protocols. *Journal of the International Neuropsychological Society* 16:846-855, 2010. PMID: 20937164
5. Price C, Mitchell SM, Brumback B, Tanner JJ, Schmalfluss I, Lamar M, Giovannetti T, Heilman KM, Libon DJ. MRI leukoaraiosis (LA) threshold and the phenotypic expression of dementia. *Neurology* (in press).

Additional recent publications of importance to the field

1. Lamar, M., Price, C., Davis, K., Kaplan, E., & Libon, D. (2002). Capacity to maintain mental set in dementia. *Neuropsychologia*, 40(4), 435-445.
2. Libon, D. J., Price, C., Garrett, K. D., & Giovannetti, T. (2004). From Binswanger's disease to Leukoaraiosis: What we have learned about subcortical vascular dementia. *The Clinical Neuropsychologist*, 18(1), 83-100.
3. Fernandez, H.D., Crucian, G. P., Okun, M.S., Price, C., Bowers, D. (2005). Mild Cognitive Impairment in Parkinson's Disease: The Challenge and the Promise. *Neuropsychiatric Disease and Treatment*, 1(1), 37-50.
4. Price, C. & Grossman, M. (2005). An on-line study of verb knowledge in individuals diagnosed with AD and FTD. *Brain and Language*, 92 (2), 217-232.

5. Libon, D.J., Price, C., Heilman, K.M., and Grossman, M. (2006). Alzheimer's Contribution to our Understanding of Vascular Dementia. *Cognitive and Behavioral Neurology*, 19(2), 112-116.
6. Price, C., Garrett, K. D., Jefferson, A. L., Cosentino, S., Tanner, J. T*, Penney, D. L., Swenson, R., Giovannetti, T., Bettcher, B. M., Libon, D. J. (2009). Leukoaraiosis severity and list-learning in dementia. *The Clinical Neuropsychologist*, 23, 944-946.
7. Miller, K. M., Price, C. C., Okun, M. S., Montijo, H., Bowers, D. (2009). Is the n-back task a clinically useful measure for assessing working memory in Parkinson's disease? *Archives of Clinical Neuropsychology*, 24(7), 711-717.
8. Kemmotsu, N., Price, C. C., Bowers, D., Okun, M. (2011). Pre-and post-GPi DBS neuropsychological profiles in a case of X-linked dystonia-Parkinsonism. *The Clinical Neuropsychologist*, 25(1), 141-159.
9. Price, C. C., Cunningham, H., Coronado, N., Freedland, A., Cosentino, S., Penney, D., Pennisi, A., Bowers, D., Okun, M., Libon, D. (2011). Clock Drawing in the Montreal Cognitive Assessment: Recommendations for Dementia Evaluation. *Dementia and Geriatric Cognitive Disorders*, 31(3), 179-187.
10. Mow, S.J; Price, C.C., Limotai, N., Oyama, G., Ward, H., Jacobson, C., Foote, K. D., Okun, M.S. (2012). Effects of STN and GPi deep brain stimulation on impulse control disorders and dopamine dysregulation syndrome. *PLoS*, 7(1), e29768.

D. Research Support

Ongoing Research Support

Current Funding

R01 NR014810-01 (PI, Price) 09/27/12 – 06/30/17 4.0 calendar
 NIH NINR \$348,478 (first year direct cost); total 2.3million
 Title: Neuroimaging Biomarkers for Post-Operative Cognitive Decline in Older Adults
 This study will determine the extent that preoperative white matter integrity predicts type of post-operative cognitive decline after major orthopedic surgery in older adults.

1K23NS060660_01 (PI/Trainee: Price) 09/31/07-07/13/13 2.0 calendar
 NINDS \$567,514
 White Matter and Cognition in PD
 New Investigator Training Grant to investigate the role of white matter on cognitive function in individuals with idiopathic Parkinson's disease relative to a group of healthy age matched adults. Patients are followed yearly for cognitive change.
 Role: PI/ Trainee; Primary Mentor: Dawn Bowers, Ph.D. , Thomas Mareci, Ph.D., Glen Stebbins, Ph.D.

1 U24 AA022002 (PI: Cook) 9/01/2012 -8/31/2017 .36 calendar
 NIH/NIAAA \$500,000 direct cost
 Southern HIV Alcohol Research Center (SHARC) admin and research support core
 The objective of this proposal is to establish the administrative structure and to provide research support for the SHARC, a collaboration that links several universities and investigators with a common goal of supporting new research related to HIV and alcohol consumption.
 Role: Co-Inv

R01 DA14498 (PI, Latimer) 07/01/12 – 01/31/14 0.6 calendar
 NIDA \$405,835.00
 Title: Adapt IFCBT as HIV Prevention Intervention for Non-Injection Drug Users
 The purpose of this study is to conduct a randomized trial of IFCBT model with adult injection and non-injection drug users.
 Role: Co-Investigator

RCI HL 100195-01 (PI: Beaver) to 06/13 0.0 calendar
Invasive Surgical Pulmonary Vein Isolation versus Medical Management in Patients with Atrial Fibrillation.
Role: Co-investigator; supervising student who assists with brain imaging analysis Principal Investigator:
Price, Catherine, Elizabeth Clinical trial examining two different treatment options for atrial fibrillation and
vascular disease contributors (i.e., white matter abnormalities).

Completed Funding

National Parkinson Foundation (PI: Price) 11/01/08-03/30/10 0.1 calendar
Non-cardiac surgery and PD: A "Proof of Principle" Study
Role: Principle Investigator, 1% effort, pilot funds \$24,000
Supports pilot data collection to post operative cognitive dysfunction in Parkinson's disease relative to
non-surgery peers. Role: PI

IIRG-06-27542 (PI: Libon) 01/02/06-12/31/09 0.6 calendar
Alzheimer Association \$35,502
The Effect of Leukoaraiosis in Alzheimer's Disease
Role: Co Investigator
Investigates white matter abnormalities (leukoariosis) on cognition in Alzheimer's disease.

NOT-OD-09-056 (PI: Price) 06/01/09-08/29/09 0.0 calendar
NINDS
White Matter and Cognition in Parkinson's disease: Summer Research Experiences for Students
and Educators 13,264
Role: PI
Opportunity for two undergraduate students to work within my laboratory during this past summer.

NIRG-05-14503 (Price) 01/02/05-12/31/08 1.8 calendar
Alzheimer Association New Investigator Award \$99,999
Non-Cardiac Surgery and AD: Cortisol and Cognitive Decline
Allows examination of whether individuals with Alzheimer 's disease are cognitively vulnerable to non-
cardiac surgery and whether this vulnerability relates to elevated post-operative cortisol levels. Data from
this study are being combined with other at-risk data (see NPF grant and IH Anesthesia Foundation).

F32- AG021363 (Price) 09/01/02-08/31/04 12 calendar
Predictors of Post-operative Cognitive Dysfunction (POCD) in Older Adults
Training grant allowing the candidate to obtain experience with post-operative cognitive dysfunction. The
study investigated neuroanatomical predictors of post-operative cognitive dysfunction in older adults
following total knee replacement surgery. \$79, 042
Role: Trainee/ PI; Mentors: Dawn Bowers, Ph.D., Terri Monk, M.D., Christiana Leonard, Ph.D.

Teaching Faculty

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Abrams, Lise	POSITION TITLE Associate Professor of Psychology		
eRA COMMONS USER NAME (credential, e.g., agency login) liseabrams			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Pomona College, Claremont, CA	B.A.	06/91	Psychology & Mathematics
UCLA, Los Angeles, CA	M.S.	12/92	Cognitive Psychology
UCLA, Los Angeles, CA	Ph.D.	06/97	Cognitive Psychology

A. Personal Statement

My research has focused on memory and language processes in younger and older adults, specifically the processes involved in comprehending and retrieving words and the changes in these processes that occur with normal aging. Specific areas of interest include: (1) memory retrieval failures such as the tip-of-the-tongue states, which are naturally-occurring retrieval failures that are characterized by a temporary inability to recall a known word; and (2) language errors such as the production of spelling errors and homophone substitution errors. Mentoring has always been a priority for me because of my own training. I became a cognitive aging researcher because of my undergraduate and graduate mentors, who developed my enthusiasm in research and showed me the excitement of furthering science through my research. I consistently publish with both graduate and undergraduate students, and I have continued to mentor my former students who became faculty members.

B. Positions and Honors

Positions and Employment

1997-2006 Assistant Professor, Department of Psychology, University of Florida, Gainesville, FL
2006-2008 Director, Cognitive and Sensory Processes Doctoral Program, University of Florida, Department of Psychology, Gainesville, FL
2006-Present Associate Professor, Department of Psychology, University of Florida, Gainesville, FL
2008-Present Undergraduate Coordinator, Department of Psychology, University of Florida, Gainesville, FL

Other Experience and Professional Memberships

1991-Present Member, Sigma Xi, the Scientific Research Society (Associate, 1991-2007)
1997-Present Member, American Psychological Association, Division 20 (Adult Development and Aging) and Division 3 (Experimental Psychology, since 2009)
1997-Present Member, Association for Psychological Science
1997-Present Member, Psychonomic Society (Associate, 1997-2004)

1998-2006	Faculty Associate, University of Florida Center for Gerontological Studies, Gainesville, FL
1999-2003	Core Faculty, University of Florida Institute on Aging, Gainesville, FL
2002-Present	Member, Gerontological Society of America
2003	Peer Reviewer, Alzheimer's Association research grants program
2004	Peer Reviewer, Issac Newton Trust grant competition
2004-Present	Member, Women in Cognitive Science
2007	Peer Reviewer, Netherlands Organisation for Scientific Research (Social Sciences), Open Programme Competition
2009	Peer Reviewer, The Dunhill Medical Trust, Grants and Research Committee
2010	Peer Reviewer, The Biotechnology and Biological Sciences Research Council (BBSRC) Research Grants
2011	Peer Reviewer, Romanian National Council for Scientific Research, Exploratory and Postdoctoral Research Projects

Honors

1991-1995	National Science Foundation Graduate Fellowship, UCLA, Los Angeles, CA
2001-2002	Outstanding Undergraduate Teaching Award, College of Liberal Arts and Sciences, University of Florida
2004	Women in Cognitive Science Mentorship Award
2006-2007	Psi Chi / Psychology Club Professor of the Year Award, University of Florida
2007	APA Division 20 and the Retirement Research Foundation Mentor Award in Adult Development and Aging
2007	Sigma Xi Young Investigator Award
2008-2009	Psi Chi / Psychology Club Professor of the Year Award, University of Florida
2010	Florida Blue Key Distinguished Mentor of Undergraduate Research Award, University of Florida
2010	HHMI Science for Life Distinguished Mentor Award, University of Florida
2011	Fellow, American Psychological Association
2011	Faculty Fellowship Summer Institute in Israel
2012	University of Florida Academy of Distinguished Teaching Scholars

C. Selected Peer-reviewed Publications (Selected from 30 peer-reviewed publications)

Most relevant to the current application (example aging-related papers)

1. White, K. K., & **Abrams, L.** (2004). Phonologically mediated priming of preexisting and new associations in young and older adults. *Journal of Experimental Psychology: Learning, Memory, and Cognition*, 30, 645-655.
2. Margolin, S. J., & **Abrams, L.** (2007). Individual differences in young and older adults' spelling: Do good spellers age better than poor spellers? *Aging, Neuropsychology, and Cognition*, 14, 529-544.
3. **Abrams, L.**, Trunk, D. L., & Merrill, L. A. (2007). Why a superman cannot help a tsunami: Activation of grammatical class influences resolution of young and older adults' tip-of-the-tongue states. *Psychology and Aging*, 22, 835-845.
4. **Abrams, L.** (2009). Exploring the generality of retest effects: Commentary on "When does age-related cognitive decline begin?" *Neurobiology of Aging*, 30, 525-527.
5. **Abrams, L.**, Farrell, M. T., & Margolin, S. J. (2010). Older adults' detection of misspellings during reading. *Journal of Gerontology: Psychological Sciences*, 65B, 680-683.
6. Farrell, M. T., & **Abrams, L.** (2011). Tip-of-the-tongue states reveal age differences in the syllable frequency effect. *Journal of Experimental Psychology: Learning, Memory, and Cognition*, 37, 277-285.

7. White, K. K., **Abrams, L.**, Palm, G. M., & Protasi, M. A. (2012). Age-related influences on lexical selection and orthographic encoding during homophone spelling. *Psychology and Aging*, 27, 67-79.

Additional recent publications of importance to the field (in chronological order)

1. White, K. K., & **Abrams, L.** (2002). Does priming specific syllables during tip-of-the-tongue states facilitate word retrieval in older adults? *Psychology and Aging*, 17, 226-235.
2. **Abrams, L.**, White, K. K., & Eitel, S. L. (2003). Isolating phonological components that increase tip-of-the-tongue resolution. *Memory and Cognition*, 31, 1153-1162.
3. **Abrams, L.**, & Rodriguez, E. L. (2005). Syntactic class influences phonological priming of tip-of-the-tongue resolution. *Psychonomic Bulletin and Review*, 12, 1018-1023.
4. **Abrams, L.** (2008). Tip-of-the-tongue states yield language insights. *American Scientist*, 96, 234-239.
5. **Abrams, L.**, Trunk, D. L., & White, K. K. (2008). Visual and auditory priming influences the production of low-frequency spellings. *Reading and Writing: An Interdisciplinary Journal*, 21, 745-762.
6. White, K. K., **Abrams, L.**, & Zoller, S. M., & Gibson, S. M. (2008). Why did I right that? Factors that influence the production of homophone substitution errors. *The Quarterly Journal of Experimental Psychology*, 61, 977-985.
7. Margolin, S. J., & **Abrams, L.** (2009). Not may not be too difficult: The effects of negation on older adults' sentence comprehension. *Educational Gerontology*, 35, 306-320.
8. Trunk, D. L., & **Abrams, L.** (2009). Do younger and older adults' communicative goals influence off-topic speech in autobiographical narratives? *Psychology and Aging*, 24, 324-337.
9. White, K. W., **Abrams, L.**, & Byrd, A. L. (2009). Generation, intentionality of processing at encoding and retrieval, and age-related associative deficits. *Memory*, 17, 481-492.
10. White, K. K., **Abrams, L.**, McWhite, C. B., & Hagler, H. L. (2010). Syntactic constraints in the retrieval of homophone orthography. *Journal of Experimental Psychology: Learning, Memory, and Cognition*, 36, 160-169.
11. White, K. K., **Abrams, L.**, & Frame, E. A. (in press). Semantic category moderates phonological priming of proper name retrieval during tip-of-the-tongue states. *Language and Cognitive Processes*.

D. Research Support

Ongoing Research Support

2R44MH081767-02A1 Richard Melker (PI) 9/01/09 – 8/31/12
NIMH

A Breath-Based Medication Adherence Monitoring System for HIV/AIDS Therapies

The goal of this SBIR Phase II Grant is to help with the design and commercialization of a handheld device that monitors adherence to HIV/AIDS medicine via breath. A patient will blow into the device, which will detect and document that the appropriate medication was taken at the proper time.

Role: Co-Investigator

T32AG05069 Michael Marsiske (PI) 5/1/08 – 4/30/13
NIH/NIA

Physical, Cognitive and Mental Health in Social Context

The goal of this training grant is to mentor predoctoral students who are interested in research careers in aging.

Role: Potential mentor/training faculty

Research Support Completed During the Last Three Years

T32DC008768-01 Leslie Gonzalez-Rothi (PI)

7/01/07-3/31/12

NIDCD/NIH

Training in Treatment of Communication Disorders and in Translational Neuroscience

The goal of this training grant is to offer postdoctoral-level research training opportunities in areas relevant to neuroplasticity in functions of swallow or communication, including respiration, phonation, articulation, language, and related cognition.

Role: Potential mentor/training faculty

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Susan Bluck, Ph.D.	POSITION TITLE Associate Professor of Psychology		
eRA COMMONS USER NAME (credential, e.g., agency login) SBluck			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
University of British Columbia	BA	05/82	Psychology
University of California, Irvine	MA	05/94	Social Ecology
University of California, Irvine	PhD	03/97	Psychology and Social Behavior
Max Planck Institute for Human Development	Postdoctoral	08/97	Lifespan Psychology
University of British Columbia	BA	05/82	Psychology

A. Personal Statement

I enthusiastically rejoin this competitive renewal application as a member of the teaching faculty. I have been involved with the T32 program since its inception (prior to funding) in 2000, and I served as a member of its Graduate Recruitment and Training Committee for 11 years (again, prior to receipt of initial funding). I oversee the Graduate Certificate in Gerontology, which is one element of the didactic focus of our program. The major goal of my research is to show how young and older adults use their own personal past as a resource in adapting to daily life. One current project focuses on how both the past and anticipated future are used to make healthy lifestyle decisions. The project uses multi-level measurement (fMRI, quantitative behavioral reports, and narrative content-coding) and includes both young and older adults. My ongoing program of research on the functions of autobiographical memory across the lifespan over the last thirteen years has provided me with the background and expertise to carry out T32-relevant research on the functions of the self-memory system in independence-promoting health lifestyle decisions. I have a broad background in lifespan psychology, with specific training in behavioral and narrative data collection and analysis using adult lifespan samples. As a postdoctoral fellow at the Center for Lifespan Psychology, Max Planck Institute for Human Development, I published a major theoretical paper on the emergence of past-related thinking (development of the life story) in adolescence, and produced empirical work on differing views of one's personal past and future across adulthood using the Midlife in the United States (MIDUS) data set. My program of research at the University of Florida has involved continued work on individuals' sense of time across the lifespan with a focus on the personal past. This research often involves both behavioral reports and content-coding of oral memory narratives collected using reliable, ecologically-valid procedures.

B. Positions and Honors

Positions

1997-2000 Postdoctoral Fellow, Center for Lifespan Psychology, Max Planck Institute for Human Development.

2000-2006 Assistant Professor, Department of Psychology, University of Florida.

2006 – Associate Professor, Department of Psychology, and Director, Graduate Certificate in Gerontology, University of Florida.

Professional Experience

- 2002-2003 *Psychology and Aging*, Consulting Editor
2003-2010 Ad hoc peer review, John Templeton Foundation, National Science Foundation, Social Sciences and Humanities Research Council of Canada
2010-2012 *Applied Cognitive Psychology*, Associate Editor
2010-2013 *Journal of Personality and Social Psychology: PPID*, Consulting Editor

Professional Memberships

- Fellow, Gerontological Society of America
Invited Member, Society for Personology
Member, American Psychological Association (Divisions 1, 5, 20)
Member, American Psychological Society
Member, Society for Applied Research in Memory and Cognition

Honors

- 1997 Postdoctoral Fellowship, Social Sciences and Humanities Research Council of Canada, (declined).
1999 John D. and Catherine T. MacArthur Foundation Research Network on Successful Midlife Development (MIDMAC), Summer Workshop participant, University of Michigan.
2002 Springer (APA Division 20) Early Career Achievement Award for Research on Adult Development and Aging.
2011 APA Mentorship Award in Adult Development and Aging, (Division 20)

C. Selected Peer-reviewed Publications

Most relevant to the current application (in chronological order)

- Demiray, B. & Bluck, S. (in press). Time since birth and time left to live: Future time perspective and psychological well-being in young adulthood and late midlife.
Bluck, S., Baron, J.M., Ainsworth, S.A., Gesselman, A.N., & Gold, K.L. (in press). Eliciting empathy for adults in chronic pain through autobiographical memory-sharing.
Alea, N., & Bluck, S. (2013). When does meaning-making predict subjective well-being? Examining young and older adults across two cultures. *Memory*, 44-63.
Demiray, B. & Bluck, S. (2011). The relation of the conceptual self to recent and distant autobiographical memories. *Memory*, 19, 975-992.
Bluck, S. & Alea, N. (2011). Crafting the TALE: Construction of a measure to assess the functions of autobiographical remembering. *Memory*, 19, 470-486.
Baron, J.M. & Bluck, S. (2011). That was a good story! Assessing the dimensions of story quality. *Discourse Processes*, 48, 93 - 118.
Glück, J., & Bluck, S. (2011). Laypeople's conceptions of wisdom and its development: cognitive and integrative views. *Journals of Gerontology: Psychological Sciences*, 0.1093/geronb/gbr011.

Additional Publications (Chronological)

- Mackay, M.M., & Bluck, S. (2010). Meaning-making in memories: A comparison of autobiographical memories of death and low point experiences. *Death Studies*, 34, 715-734.
Bluck, S., & Alea, N. (2009). Characteristics of positive autobiographical memories in adulthood. *International Journal of Aging and Human Development*, 69, 247 – 265.
Demiray, B., Gülgöz, S. & Bluck, S. (2009). Examining the life story account of the reminiscence bump: Why we remember more from young adulthood. *Memory*, 17, 708-723.
Bluck, S. & Alea, N. (2009). Thinking and talking about the past: Why remember? *Applied Cognitive Psychology*, 23, 1089-1104.
Glück, J., Strasser, I., & Bluck, S. (2009). Gender differences in implicit theories of wisdom. *Research in Human Development*, 6, 27-44.
Bluck, S., Dirk, J., Mackay, M., & Hux, A. (2008). Life experience with death: Relation to death attitudes and to the use of death-related memories. *Death Studies*, 32, 524-549.
Glück, J., & Bluck, S. (2007). Looking back across the lifespan: a life story account of the reminiscence

bump. *Memory and Cognition*, 35, 1928-1939.

Alea, N., & Bluck, S. (2007). I'll keep you in mind: The intimacy function of autobiographical memory. *Applied Cognitive Psychology*, 21, 1091-1111.

Glück, J., & Bluck, S., Baron, J., & McAdams, D.P. (2005). The wisdom of experience: autobiographical reports across adulthood. *International Journal of Behavioral Development*, 29, 197-208.

Bluck, S., Alea, N., Habermas, T., & Rubin, D.C. (2005). A TALE of three functions: the self-reported uses of autobiographical memory. *Social Cognition*, 23, 91-117.

Alea, N., Bluck, S., & Semegon, A. (2004). Young and older adult's expression of emotional experience: autobiographical narratives tell a different story. *Journal of Adult Development*, 11, 235 -250.

Levine, L.J., & Bluck, S. (2004). Painting with broad strokes: happiness and the malleability of event memory. *Cognition and Emotion*, 18, 559-574.

Bluck, S. & Glück, J. (2004) Making things better and learning a lesson: "wisdom of experience" narratives across the lifespan. *Journal of Personality*, 72, 543-572.

Alea, N., & Bluck, S. (2003). Why are you telling me that? A conceptual model of the social function of autobiographical memory. *Memory*, 11, 165-178.

Bluck, S. & Habermas, T. (2001b). The life story schema. *Motivation and Emotion*, 24, 121-147.

Bluck, S. & Li, K.Z.H. (2001). Predicting memory completeness and accuracy: The role of emotion and exposure in repeated autobiographical recall. *Applied Cognitive Psychology*, 15, 145-158.

Habermas, T. & Bluck, S. (2000) Getting a life: The emergence of the life story in adolescence. *Psychological Bulletin*, 126, 748-769.

D. Ongoing Research Support

Consultant-Investigator, *Life Challenges, Resources, and Wisdom: Initiating the Birthday Study*, FWF (Austrian Science Fund), 2013-2015. Principle Investigator: Judith Glück, Klagenfurt University, Austria. Total: € 360.000 (\$470, 096 US). *Note:* Non-Austrians cannot officially be listed as Investigators on FWF proposals.

Co-Principal Investigator, LISS Panel, 2011 – 2013. Autobiographical storytelling across the lifespan. Principal Investigator: Gerben Westerhof, University of Twente, The Netherlands. The LISS panel is financed by NWO, the major Dutch research funding organization. It is an internet-based panel study with 8000 Dutch households that were recruited through random sampling.

Completed Research Support

Co-Principal Investigator, Life stories of never married adults in middle and late life. Marchionne Foundation, 2002-2004. Principal Investigator: Tanya Koropecji-Cox. This project combines analysis of existing large-scale data with newly collected qualitative life story data to examine the effects of midlife and late life marital status on well-being in late life.

Consultant, European Study on Adult Well-being (ESAW). Contract Nr. QLK6-CT-2001-00280 from the 5th European Framework Program for Research and Technology Development, 2002-2004. Principal Investigator: Germain Weber. This large scale survey examines multiple domains of functioning in mid and late life and their relation to well-being. This includes life event data for a representative sample of approximately 1200 midlife and older adults.

Investigator, *Wisdom and the life story: How life experiences foster wisdom*. Arete Initiative, University of Chicago and John Templeton Foundation, 2008-2010. Principle Investigator: Judith Glück, University of Klagenfurt, Austria. Total: \$98,434. This research compares life stories of individuals nominated as wise to their age peers, using the MORE wisdom model.

Consultant, *The Development and Manifestation of Wisdom in Individual Lives*. FWF der Wissenschaftsfonds (Austrian Science Foundation), 2008-2011. Principle Investigator: Judith Glück, University of Klagenfurt, Austria. Total: €355,000. This research analyzes narrative and

personality data of individuals nominated as wise and their age peers to determine lifetime predictors of the development of wisdom.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Neff, Donna Felber	POSITION TITLE Associate Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) DONNANEFF			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Erie Community College, Williamsville, NY	ADNS	1971-73	Nursing
The University of Akron, Akron, OH	RN-MSN	1989-94	Nursing
Frances Payne Bolton School of Nursing, Case Western Reserve University, Cleveland, OH	PhD	1997-2101	Nursing

A. Personal Statement

Dr. Neff continues with the T32 as a member of the teaching faculty. The focus of Dr. Neff's research is to understand the determinants of patient health outcomes and identify leverage points for improving the systems responsible for patient care. Her earlier research focused primarily on patient-level clinical phenomena (including individual-level independent/dependent variables such as hospital readmissions rates for home care patients with COPD). In 2009, with funding from an NIH/NINR Mentored Research Scientist award, Dr. Neff shifted to the investigation of how hospital organization can contribute to both nurse and patient outcomes. The proposed project aligns with her current work related to the healthcare workforce, specifically to the effects of the hospital, nurse practice environment on both patient and nurse outcomes. Dr. Neff has expertise in many aspects related to the research proposal including: construction of research plans, study development and implementation, as well as evaluation from her extensive history as a PI on multiple grants; clinical expertise as a nurse who has practiced for over 30 years, the majority of which were in acute care settings; educational program development and evaluation expertise from over 15 years as a nurse educator, and; practice, education and research collaboration with multiple disciplines. Dr. Neff is the Chair of the Nursing Academy, National Academies of Practice and currently, she is working in partnership with such disciplines as medicine, psychology, and social work in the development of a multidisciplinary policy statement that addresses healthy aging. For the proposed research, Dr. Neff will supervise and actively participate in the project development, evaluation (including data analysis), refinement, and implementation of the simulation and team training program.

B. Positions and Honors

2000-2001	Fellow, Hirsch Institute of Best Practices Based on Evidence, Frances Payne Bolton School of Nursing, OH
2001- 2003	Program Evaluator, Alliance VNA and St. Luke AME Church, CONNECT: Coalition of Networking Neighbors Effecting Change Together Alliance, OH
2001-2003	Assistant Professor, College of Nursing, The University of Akron, Akron, OH>
2004-2011	Assistant Professor, Adult and Elderly Nursing, University of Florida College of Nursing, Gainesville, FL

Honors/Awards

1993	Outstanding Graduate Student, The University of Akron, College of Nursing, Akron, OH
1994	Outstanding Graduate Student, Sigma Theta Tau, International Honor Society, Delta Omega Chapter, The University of Akron, Akron, OH
1997	Outstanding Undergraduate Faculty, Kent State University, School of Nursing, SPN Award, Kent, OH
2003	Scholar, <i>Hartford Institute of Geriatric Nursing Research</i> , John A. Hartford Institute for Geriatric Nursing, New York University.
2005	Distinguished Nursing Alumni, The University of Akron, Akron, OH
2011	Induction into the National Academy of Practice as a Distinguished Scholar
2013	University of Florida's Research Professorship

C. Selected Peer-reviewed Publications (highlighted need PCMIDs)

- Neff, D.F, Cimiotti, J., Heusinger, A., & Aiken, L.H. (2011). Nurses reports from the frontlines: Analysis of a statewide nurse survey. *Nursing Forum*, 46(1), 4-10. PMCID: 3117634
- Lee, A.K., McHugh, M.D., Sloane, D., Cimiotti, J.P., Flynn, L., Neff, D.F., & Aiken, L.H. (2009). Nursing key to patient satisfaction. *Health Affairs*, 28(4), 202-210. PMCID: 2718727
- Aiken, L.H., Cimiotti, J.P., Sloane, D.M., Smith, H.L., Flynn, L., Neff, D.F. (2011). Effects of nurse staffing and nurse education on patient deaths in hospitals with different nurse work environments. *Medical Care*, 49, 1047-1053. PMCID: 3217062
- Everhardt, D., Neff, D.F., Al-Amon, M., & Weech-Maldonado, R. (2013). The effects of nurse staffing on hospital financial performance: Competitive versus less competitive markets. *Health Care Management Review*. 38(2), 146-155. PMID: 22543824
- Neff, D.F., & Harman, J. (2013) Foreign Educated Nurses: Effects on Nurse, Quality of Care and Patient Safety Indicator Outcomes. *Journal of Nursing Regulation*, 4(1), 19-24.
- Neff, D. F., Aiken, L.H., Cimiotti, J., Sloane, D.M., & Wu, E. (in print). Utilization of non-US Educated nurses in US hospitals: Implications for hospital mortality. *International Journal for Quality in Health Care*. PMC Journal – In Process

D. Research Support

9/2009 – 8/2012

Principal Investigator.

Hospital Patient Outcomes of Mortality and Failure to Rescue Associated with Internationally Educated Nurse
Mentored Research Scientist Development Award, NIH/NINR. 1K01NR011174-01A1.
Total Award \$297,621.00

The primary purpose of this study was to scrutinize one compositional factor of the nurse workforce among multiple hospitals—Internationally Educated Nurses (INGs)—as a case example of their potential impact on patient outcomes. Dr. Neff conducted a replication of Dr. Linda Aiken's statewide nurse surveys that were conducted in California, New Jersey, and Pennsylvania. Dr. Neff surveyed registered nurses who lived and worked in Florida in 2008, and data from the Florida survey was pooled with data from the other states. Access to detailed information about additional organizational traits of hospitals, including patient-to-nurse staffing

ratios and empirical measures of the nurse practice environment, allowed for exploration of a range of other possible explanations for associations between employment of high proportions of INGS and patient outcomes.

The K01 was integral to Dr. Neff's development in health services research and policy. She gained the following proficiencies: 1) sophistication in statistical methodology and computer applications necessary for doing health services research; 2) development in organizational/outcomes research, theory, and methodology, particularly as these apply to studies of patient and nurse outcomes and to health care settings; and 3) health policy. Dr. Neff will apply these skills to the proposed project.

11/2011– 12/2012

Principal Investigator.

Foreign Educated Nurses: Effects on Nurse, Quality of Care and Patient Safety Indicators.

National Council of State Boards of Nursing.

Total Award \$54, 447.00. 20% Effort for one year award.

The purpose of this study was to examine the effects of hospitals proportions of FENS on nurse outcomes, hospital quality of care, and patient safety indicator outcomes in Florida hospitals. Dr. Neff utilized primary data from a 2008 survey of Florida nurses and hospital organizational data from the American Hospital Association to study the patient outcomes associated with the proportion of hospitals' nurses who are foreign educated. Data was gathered through a combination of the population-based survey of registered nurses that include their place of employment and an administrative source of information on hospital characteristics.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Roberts, Beverly L.	POSITION TITLE Annabel Davis Jenks Endowed Professor of Nursing		
eRA COMMONS USER NAME (credential, e.g., agency login) BLRoberts			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
University of Michigan, Ann Arbor, MI	BSN	1969	Nursing
Wayne State University, Detroit, MI	MSN	1981	Nursing
Case Western Reserve University, Cleve, OH	PhD	1984	Nursing

A. Personal Statement

Dr. Roberts' role in this T32 predoctoral program builds upon her expertise in mentoring and gerontological research. From 2007-2011, she was a member of the Graduate Recruitment and Training Committee of this T32 program, and she remains an enthusiastically involved mentor.

Dr. Roberts' has working knowledge of supportive care needs of men after radical prostatectomy since she and Dr. Weber worked closely together on several extra- (R03CA96204) and intra-mural funded pilot studies testing support interventions in a population of men with prostate cancer who were treated by radical prostatectomy. Dr. Roberts has extensive experience in conceptualizing and executing complex repeated-measurement designs as a Principal Investigator (R01NR02575, R01NR02822, R01NR04012, AR20618) and in conducting randomized clinical trials as a co-investigator (P01A604391, P60AG10418, R01NR04428, R01AG05635, R03CA96204) of randomized clinical trials in behavioral research. Dr. Roberts extensive research knowledge working with older adult and clinical populations including those that examined factors affecting depression and stress on the elderly. This coupled with her federally funded research projects have provided her with important experience and expertise on the way in which older adults marshal their social and psychological resources when confronting complex life circumstances such as the target population of this study, men with prostate cancer. Dr. Roberts' involvement in this study adds the needed expertise in understanding the interrelationships among self-efficacy, HRQOL, and depression. Moreover, Dr. Roberts has extensive statistical research skills (i.e., advanced multivariate statistics, structural equation modeling, hierarchical linear modeling) that will assist the research team.

I bring a full repertoire of experience and expertise in gerontology, with a special emphasis on exercise to improve physical capacities and reduce functional limitations and disability. I have refocused my research from traditional exercise to tai chi because of its high acceptability to older adults and potential for important health benefits, particularly those associated with continued ability to perform essential activities of daily living. I am a certified Tai Chi Master Trainer. As principal investigator, I have had two clinical trials of exercise in older adults funded by the National Institute of Nursing Research. I have been a co-investigator in two clinical trials funded by the National Institutes of Health. One clinical trial assessed the effect of a cognitive behavioral intervention on exercise maintenance, and the other examined the effects of a cognitive behavioral intervention on mental health in older adults.

B. Positions and Honors.

Professional Positions and Employment

1969-1973	Clinical Nurse, William Beaumont Hospital, Royal Oak, MI
1973-1980	Instructor, Wayne County General Hospital, Westland, MI
1976-1978	Instructor, Schoolcraft Community College, Livonia, MI
1981-1982	Clinical Nurse Spec, Chronic Disease Care Program, Henry Ford Hospital, Detroit, MI
1982-1984	Instructor, School of Nursing, Case Western Reserve University (Case), Cleveland, OH

1982-1987	Associate in Nursing, University Hospitals of Cleveland, Cleveland, OH
1984-1987	Consultant, Aging & Long-term Care, Veterans Admin Medical Center, Cleve, OH
1984-1989	Assistant Professor, School of Nursing, Case Western Reserve University, Cleveland, OH
1984-2005	Senior Faculty Associate, Center on Aging & Health, Case, Cleveland, OH
1989-1999	Associate Professor, School of Nursing, Case, Cleveland, OH
1998-2003	Associate Dean for Academic Programs, Case; Cleveland, OH
1999-2005	Garvin Professor of Nursing, Case Western Reserve University, Cleveland, OH
2003-2005	Administrative Associate to the Dean for Special Programs, Case, Cleveland, OH
2005-present	Annabel Davis Jenks Endowed Professor, University of Florida, Gainesville, FL

Honors/Awards (selected)

1967	Sigma Theta Tau International Honor Society
1984	Outstanding New Investigator Award, Council of Nurse Researchers
1992	Fellow, American Academy of Nursing
1994	Honor a Researcher Award, Midwest Nursing Research Society
1997	Fellow, Gerontological Society of America
2002	Distinguished Nursing Researcher, Friends of Nursing Institute of Nursing Research
2003	Distinguished Contributions to Research Award, Midwest Nursing Research Society

Other Experience and Professional Memberships

Editorial Board	Asian Nursing Research; Research and Theory for Nursing Practice
Referee	Nursing Research; International Nursing Research; Applied Nursing Research; Asian Nursing Research; Experimental Gerontology
Study Section Member	National Institute of General Medicine, ad hoc reviewer, Center for Scientific Review Special Emphasis Panel, Minority Development Program 2004-2006

C. Selected peer-reviewed publications

Most Relevant to the Application (Selected from recent publications)

1. Chang, C. C. & Roberts, B. L. (2011). Strategies for feeding patients with dementia. *American Journal of Nursing*, 111, 36-44. (featured article with CEUs)
2. Seo, Y., Roberts, B. L., LaFramboise, L., Yates, B. C. & Yurkovich, J. M. (2011). Path analysis of disability in instrumental activities of daily living in persons with heart failure. *Journal of Cardiovascular Nursing*, 26, 89-98.
3. Chang, C. C. & Roberts, B. L. (2011). Malnutrition and feeding difficulty in Taiwanese elderly with dementia. *Journal of Clinical Nursing*, 20, 2153-2161.
4. Buman M.P., Giacobbi P.R. Jr., Dzierzewski J.M., Aiken Morgan A., McCrae C.S., Roberts B.L., Mariske M. (2011). Peer volunteers improve long-term maintenance of physical activity with older adults: a randomized controlled trial. *Journal of Physical Activity and Health*, 8(Suppl 2), S257-S266.
5. Song, R., Roberts, B. L., Lee, E., Lam, P. & Baie, S. (2010). A randomized study of the effects of tai chi on muscle strength, bone mineral density, and fear of falling. *Journal of Alternative and Complementary Medicine*, 16(3), 227-233.
6. Roberts, B. L., Dolansky, M. & Weber, B. A. (2010). Psychometric properties of the task self-efficacy scale for everyday activities in older adults. *Research and Theory for Nursing Practice*, 24(2), 42-56.
7. Roberts, B. L., Dolansky, M. & Weber, B. A. (2010). Psychometric properties of the task self-efficacy scale for everyday activities in older adults. *Research and Theory for Nursing Practice*, 24(2), 42-56.
8. Song, R., Ahn, S., Roberts, B. L., Lee, E. O. & Ahn, Y. H. (2009). Effects of tai chi in a self-management program for individuals with type 2 diabetes. *Journal of Alternative and Complementary Medicine*, 15, 627-632.
9. Seo, Y. & Roberts, B. L. (2008). Predictors of motor tasks essential for daily activities. *Journal of Cardiac Failure*, 14, 296-302.

10. Weber, B. A., Roberts, B. L., Mills, T. L., Chumbler, N. R., & Algood, C. B. (2008). Physical and emotional predictors of depression after radical prostatectomy. *American Journal of Mens Health*, 2, 165 – 171. PMID: 19477780
11. Zauszniewski, J. A., Krafcik, K., Preechawong, S., Chung, C., Airey, T., Wilke, P., Morris, D. L. & Roberts, B. L. (2004). Focused reflection reminiscence group for elders: Implementation and evaluation. *Journal of Applied Gerontology*, 23, 429-442.
12. Zauszniewski, J.A., Picot, S.J.F., Roberts, B.L., Debanne, S., & Wykle, M.L. (2005). Predictors of resourcefulness in African American women. *Journal of Aging and Health*, 17, 609-633.
13. Weber, B.A., Roberts, B.L., Yarandi, J., Mills, T.L., Chumbler, N.R. & Wajsman, Z. (2007). The impact of dyadic social support on self-efficacy. *Journal of Aging and Health*, 19, 630-645. PMID: 17682078
14. Weber, B. A., Roberts, B. L., Chumbler, N. R., Mills, T. L., & Algood, C. B. (2007). Urinary, sexual, and bowel dysfunction and bother after radical prostatectomy. *Urologic Nursing*, 27 (6), 527-533. PMID: 18217536
15. Moore, S.M., Charvat, J.M., Gordon, N.H., Pashkow, F., Ribisl, P., Roberts, B.L., & Rocco, M. (2006). Effects of a CHANGE intervention to increase exercise maintenance following cardiac events. *Annals of Behavioral Medicine*, 31, 53-62.
16. Zauszniewski, J.A., Eggenschwiler, K., Preechawong, S., Roberts, B.L., & Morris, D.L. (2006). Effects of teaching resourcefulness skills in elders. *Aging and Mental Health*, 10, 404-412.
17. Jeon, H. S., Dunkle, R. & Roberts, B.L. (2006). Worries of the oldest-old. *Health and Social Work*, 31, 256-265.
18. Weber, B. A., Roberts, B. L., Resnick, M., Deimling, G., Zauszniewski, J., Musil, C., & Yarandi, H. (2004). The effect of dyadic intervention on self-efficacy, social support, and depression for men with prostate cancer. *Psycho-Oncology* 13, 47 – 60. PMID: 14745745

D. Research Support

Active

National Institute on Aging (Marsiske) 6/1/08 – 5/31/13
 National Institute on Aging
 Physical, Cognitive and Mental Health in Social Context

The focus of this training grant is on physical, cognitive and mental health in the social context and aging. The grant will support 5 pre-doctoral students.

Completed

National Institute of Aging (Pahor) NIH/NIA 1 UO1 AG022376-01 07/01/2006 – 06/30/2011
 National Institute of Aging
 Older American's Independence Center P30 AG028740-01

The major goals of this program are to assess the mechanisms leading to sarcopenia and functional decline, and to develop and test interventions for the treatment and prevention of physical disability in older adults.

Aging Network Award (McCrae) 6/1/07-05/31/09
 University of Florida Opportunity Award
 Trial of a Multi-Component Exercise Promotion Intervention for Older Adults

The purposes of this study are (1) to assess the effects of a novel exercise promotion intervention on primary outcomes of exercise behavior and fitness in sedentary adults aged 50 years and older; and (2) to assess ongoing and dynamic changes in secondary psychosocial outcomes thought to be related to exercise (cognition, sleep, self-efficacy, and well-being), all of which are expected to respond positively to increases in activity levels and physical competence, as well as increases in health and aerobic capacity due to fitness.

University of Florida Opportunity Fund (Roberts) 6/1/06-5/31/08

University of Florida Opportunity Award

Effects of Tai Chi on Physical Performance, Functional Limitation and Disability.

The purposes of this pilot grant was to refine a 16-week tai chi program and to assess the effects of this intervention on physical performance, functional limitations, cognitive-motor interference and disability.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Robin Lea West, Ph.D.	POSITION TITLE Professor, Department of Psychology, University of Florida		
eRA COMMONS USER NAME (credential, e.g., agency login) rlwest			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
University of Nebraska	BA	05/1973	Psychology
Vanderbilt University	MA	08/1978	Psychology
Vanderbilt University	PhD	12/1980	Psychology

A. Personal statement (not required)

Dr. West is a senior member of the Teaching Faculty for the current T32 doctoral program. She is a past co-mentor of one of the trainees (Angi Semegon). Dr. Robin West is a Professor of Psychology and has been conducting research on memory and aging for over 30 years. Dr. West completed her M.A. and Ph.D. at Vanderbilt University and did postdoctoral work at the Aging and Development Program at Washington University in St. Louis. Dr. West has been in the Department of Psychology at the University of Florida since 1987 and is currently the department Graduate Coordinator. Formerly, she served as director of the Center for Gerontological Studies and associate director of the Institute on Aging. Dr. West is the author of over 50 academic papers, and a popular memory book, entitled MEMORY FITNESS OVER 40, which has been published in four countries. She has an extensive record of university and public service and has dedicated herself to the important task of explaining scientific findings to lay audiences through her writing and public appearances. Dr. West has won numerous awards, including a Fulbright Fellowship, a TIP Teaching Award, a Mentor award from the American Psychological Association Division 20 and a MindAlert award from the American Society on Aging for her Everyday Memory Clinic training program for seniors. She has served on the editorial boards of three national research journals, including Psychology and Aging. Dr. West's research on everyday memory and aging, and memory self-regulation, has been funded by the National Institute of Health, the Brookdale Foundation, and The Retirement Research Foundation.

B. Positions and Honors.

Positions

Full Professor, Dept. of Psychology, University of Florida (UF), 2004 to present
Graduate Coordinator, Dept. of Psychology, 2007-2010
Training Director, Developmental area, Dept. of Psychology, 2005-2007

Associate Professor, Dept. of Psychology, UF, 1990-2004
Associate Director for Education, Institute on Aging, 1999-2002
Director/Interim Director, Center for Gerontological Studies, 1998-2002
Director, Everyday Memory Clinic, 2002- present
Associate Director, Center for Gerontological Studies, 1991-1997 (exc. sabbatical)
Training Director, Developmental area, Dept. of Psychology, 1990-1997 (exc. sabbatical)

Fulbright Fellow, 1995

Brookdale National Fellow, 1989-1992

Assistant Professor, Dept. of Psychology, UF, 1987-1990
Director of Curriculum, Center for Gerontological Studies, 1986-1990

Postdoctoral Research Fellow, Aging and Development Laboratory, Washington University (St.

Louis), 1983-1984

Visiting Appointments:

- Brandeis University, Dept. of Psychology and Volen Center for Complex Systems, 2005
- Institute for Information Processing and Decision Making, University of Haifa, Israel, 1995
- Brookdale Institute of Gerontology & Adult Human Development in Israel, and Hebrew University Dept. of Psychology, Jerusalem, 1990-1991.
- Dept. of Psychology/Dept. of Clinical and Health Psychology, University of Florida, 1984-1987.
- Department of Psychology, Memphis State University, 1980-1983.

Honors

- Selected for Who's Who in America (65th ed. 2011, and subsequent editions)
- Outstanding Research Mentor Award, Network for Biobehavioral and Social Research and Training in Aging, University of Florida, 2009.
- Selected for World Who's Who of Women (15th ed., 2009 and subsequent editions)
- Science for Life Distinguished Mentor Award (funded by the Howard Hughes Medical Institute) for mentoring of undergraduate science research, University of Florida, 2007
- MindAlert Award(for best older adult mental fitness program), ASA and METLife Foundation, 2007 (national)
- Mentor Award, APA Division 20 and Retirement Research Foundation, 2006 (national)
- Elected Fellow APA Division 3 (Experimental Psychology), 2002 (national)
- Fulbright Foreign Scholarship in Israel, 1995 (international)
- TIP Award for teaching excellence, University of Florida, 1994
- Elected Fellow APA Division 20 (Adult Development and Aging), 1994 (national)
- Elected Fellow GSA Behavioral and Social Sciences Section, 1994 (national)
- Brookdale National Fellowship, Brookdale Foundation, 1989 (national)
- Outstanding Faculty Award, Students for the Advancement of Gerontological Education, University of Florida, 1986

C. Peer-reviewed publications or manuscripts in press.

- Percival, S. S. & **West, R. L.** (In press, 2012). Grapes, wines and juices: Health benefits in humans. In Skinner, M et al. (Eds). Fruit Bioactives: Heath Benefits and Functional Foods. New York: Wiley-Blackwell. [invited]
- West, R. L.**, Ebner, N., & Hastings, E. C. (In press). Linking goals and aging: Experimental and life-span approaches. In E. Locke & G. Latham (Eds.) New Developments in Goal Setting and Task Performance. New York: Psychology Press. [invited, refereed]
- West, R. L.** (2012). A commentary on historical and innovative approaches to memory intervention for older adults. [Commentary on article by McDaniel and Bugg: Memory training interventions: What has been forgotten.] Journal of Applied Research in Memory and Cognition,1, 53-55. [invited, refereed]
- West, R. L.**, & Hastings, E. C. (2011). Self-regulation and recall: Growth curve modeling of intervention outcomes for older adults. Psychology and Aging. 26, 803-812.
- Hastings, E. C., & **West, R. L.** (2011). Goal orientation and self-efficacy in relation to memory in adulthood. Aging, Neuropsychology, and Cognition, 18, 471-493.
- Rowe, C. A., Nantz, M. P., Nieves, C., **West, R. L.**, & Percival, S. S. (2011). Regular consumption of concord grape juice benefits human immunity. Journal of Medicinal Food, 14, 69-78. [NOTE: the authorship is in reverse order in this journal; first author is listed last]
- Wong, S., & **West, R.** (2010). Effects of mood induction on performance test anxiety. University of Florida Journal of Psychological Science, 1, 3-21.

- Berry, J., Hastings, E., **West, R.**, Lee, C. , & Cavanaugh, J. (2010). Memory aging: Deficits, beliefs, and interventions. In J.C. Cavanaugh, C. K. Cavanaugh, J. M. Berry, & R. L. West, Eds., *Aging in America, Volume 1: Psychological Aspects of Aging* (pp. 255-299). New York: Praeger Press.[invited]
- J.C. Cavanaugh, C. K. Cavanaugh (Series Editors.), J. M. Berry, & **R. L. West** (Volume Editors.) (2010). *Aging in America, Volume 1: Psychological Aspects of Aging*. New York: Praeger Press. [invited]
- Miller, L. M. S., & **West, R. L.** (2010). The effects of age, control beliefs, and feedback on self-regulation of reading and problem solving. *Experimental Aging Research*, 36, 40-63.
- Hastings, E. C., & **West, R. L.** (2009). The relative success of a self-help and group-based memory training program. *Psychology and Aging*. 24, 586-594.
- West, R. L.**, Dark-Freudeman, A., & Bagwell, D. K. (2009). Goals-feedback conditions and memory: Mechanisms for memory gains in older and younger adults. *Memory*, 17, 233-244.
- Bagwell, D. K., & **West, R. L.** (2008). Assessing compliance: Active vs. inactive trainees in a memory intervention. *Clinical Interventions in Aging*. 3, 371-382.
- West, R. L.**, Bagwell, D. K., & Dark-Freudeman, A. (2008). Self-efficacy and memory aging: The impact of a memory intervention based on self-efficacy. *Aging, Neuropsychology, and Cognition*. 15, 302-329.
- West, R. L.**, & Smith, S. L. (2007). Development of a hearing aid self-efficacy questionnaire. *International Journal of Audiology*, 46, 759-71.

Advisory Board Members

BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors in the order listed on Form Page 2.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Fielding, Roger A.	POSITION TITLE Professor of Nutrition and Medicine Senior Scientist		
eRA COMMONS USER NAME Roger_A_Fielding			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Boston University, Sargent College, Boston, MA	BS	09/83	Applied Physiology
Ball State University, Muncie, IN	MA	05/85	Human Bioenergetics
Tufts University, Boston, MA	PhD	11/93	Human Nutrition

A. PERSONAL STATEMENT

I understand that you are interested in my participation because of my expertise and experience with doctoral training in aging, my personal role as a nutrition scientist within a multidisciplinary research environment, and my understanding (based on my program of research) of the antecedents of, and some possible interventions for the, promotion of independence and the prevention of disability in older adults. I have extensive experience in mentoring junior faculty, postdoctoral scholars and predocs. I look forward to participating in annual program reviews, and your summaries of trainee progress, faculty/student participation, as well as your internal evaluations of strengths and weakness of the program. I think we will be able to dynamically "fine tune" the program each year to fit the evolving needs of your institution and of gerontology/geriatrics more generally.

I have the necessary experience and expertise to successfully serve as an external advisor. After completing my PhD in Nutrition from Tufts University in 1993, I began my research career in the Department of Health Sciences at Boston University. During that time we initiated studies examining the role of skeletal muscle power output on physical function and disability in older adults, as well as parallel studies examining intracellular signaling events in contracting skeletal muscle. Since that time, we have conducted numerous clinical studies of exercise and muscle function in older adults along with an emerging program in the basic science of age-related muscle atrophy. We have also explored the effects of nutritional, pharmacological, and exercise therapies on changes in skeletal muscle structure and function with advancing age. Since being recruited to the Jean Mayer USDA Human Nutrition Research Center on Aging at Tufts University in 2004, I have continued to explore this line of investigation and to examine the role of nutrition and exercise on muscle performance in older animals and human. I presently serve as PI for the Tufts LIFE study field center and am co-chair of the Intervention and Operations Committee for LIFE.

B. POSITIONS AND HONORS

Positions and Employment

1993-1994	<u>Clinical Assistant Professor</u> , Boston University, Department of Health Sciences
1993-1996	<u>Director Fitness Evaluation Center</u> , Sargent Clinic, Boston University
1993-1998	<u>Scientist III</u> , Jean Mayer USDA Human Nutrition Research Center on Aging at Tufts University, Boston, MA (JM USDA HNRCA)
1995-1999	<u>Assistant Professor of Health Sciences</u> , Boston University, Department of Health Sciences
1999-2004	<u>Associate Professor of Health Sciences (tenured)</u> , Boston University, Dept of Health Sciences
1999-2004	<u>Director Human Physiology Laboratory</u> , Boston University, Department of Health Sciences
2004-present	<u>Director, Scientist I, Nutrition, Exercise Physiology, and Sarcopenia Laboratory</u> , JM USDA HNRCA
2005-present	<u>Director</u> , Body Composition Analysis Center, Friedman School of Nutrition Science and Policy, Tufts University (SNSP)
2005-present	<u>Professor of Nutrition</u> , SNSP
2006-2010	<u>Associate Program Director</u> , Clinical Translational Research Center (formerly GCRC, Tufts Medical Center)
2007-present	<u>Director</u> , Body Composition Unit, Boston Obesity Nutrition Research Center

2007-present Senior Scientist, JM USDA HNRCA
2007-present Professor of Medicine, Tufts University School of Medicine (TUSM)
2008-present Associate Director, Boston Older Americans Independence Center for Translational Research in Function Promoting Anabolic Therapies, Boston University-Tufts University

Other Experience and Professional Memberships

1995 Ad hoc reviewer for Department of Veteran's Affairs merit research grant
1996-2004 Member, Boston University Institutional Review Board (Human Studies)
1997-1999 Brookdale Foundation National Fellow
1999 Member, NIH-CSR Special Emphasis Panel, Centers for Mind-Body Interactions and Health
1999 Member, Department of Veteran's Affairs Review Panel, Physiological Foundations of Physical Performance and Combat Readiness
2002-present Lecturer on Physical Medicine and Rehabilitation, Harvard Medical School, Department of Physical Medicine and Rehabilitation
2003 Review Panel Member, NASA/ESA/CNES International Long-term Bed Rest Study
2003 Member, NIA Special Emphasis Panel, Metabolic Effects of Bedrest
2003-2008 Charter Member, Aging Systems and Geriatrics Study Section, PHS-NIH
2003-present Member, Brookdale Institute on Aging
2004-present Member, American Federation for Aging Research, National Scientific Advisory Council
2012-present Associate Editor, Journal of Gerontology Medical Sciences

C. SELECTED PEER-REVIEWED PUBLICATIONS (from 20 reviews/chapters, and 110 original articles) **Most relevant to the current application**

1. Sparrow, D., D. Gottlieb, D. DeMolles, **R.A. Fielding**. Increases in muscle strength and balance using a resistance training program administered via a telecommunications system in older adults. *J. Gerontol Med Sci.* 2011 Nov;66(11):1251-7. Epub 2011 Aug 17. PMID:21852283 PMCID: PMC3304299
2. **Fielding, R.A.**, B.Vellas, W.J. Evans, S. Bhasin, J.E. Morley, A.B. Newman, G. van Kan, S. Andrieu, J. Bauer, D. Breuille, T. Cederholm, J. Chandler, C. De Meynard, L. Donini, T. Harris, A. Kannt, F. Keime Guibert, G. Onder, D. Papanicolaou, Y. Rolland, D. Rooks, C. Sieber, E. Souhami, S. Verlaan, M. Zamboni. Sarcopenia: an undiagnosed condition in older adults. Current consensus definition: prevalence, etiology, and consequences. International working group on sarcopenia. *J Am Med Dir Assoc.* 2011 May;12(4):249-56. Epub 2011 Mar 4. PMID: 21527165 PMCID: PMC33771663
3. **Fielding, R.A.**, W.J. Rejeski, T. Church, M. Espeland, J. Guralnik, T.M. Gill, J. Katula, A.C. King, S.B. Kritchevsky, M. McDermott, M.E. Miller, S. Nayfield, A.B. Newman, J. Williamson, S. Romashkan, and M. Pahor for the LIFE study investigators. The Lifestyle Interventions and Independence for Elders (LIFE) Study: Design and Methods. *J. Gerontol A Biol Sci Med Sci.* 2011 Nov;66(11):1226-37. Epub 2011 Aug 8. PMID:21825283 PMCID: PMC3193523
4. Reid, K.F., G. Doros, D.J. Clark, C. Patten, R.J. Carabello, G. J.Cloutier, E.M. Phillips, L.S. Krivickas, W.R. Frontera, **R.A. Fielding**. Muscle power failure in mobility-limited older adults: preserved single muscle fiber function despite reduced whole muscle size, quality and neuromuscular activation, quality and neuromuscular activation. *Eur J Appl Physiol.* 2012 Jun;112(6):2289-301. Epub 2011 Oct 18. PMID:22005960 PMCID: PMC3394542
5. Heffernan, K.S., T.M. Manini, F.C. Hsu, S.N. Blair, B.J. Nicklas, S.B. Kritchevsky, A.B. Newman, K. Sutton-Tyrrell, T.S. Church, W.L. Haskell WL, **R.A. Fielding**. Relation to Pulse Pressure to Long-Distance Gait Speed in Community-Dwelling Older Adults: Findings from the LIFE-P Study. *PLoS One.* 2012;7(11):e49544. doi: 10.1371/journal.pone.0049544. Epub 2012 Nov 21. PMID: 23185357 *PMCID Pending*

Additional recent publications of importance to the field

1. Fiatarone-Singh, M.A., W. Ding, T.J. Manfredi, G.S. Solares, E.F. O'Neill, K.M. Clements, N.D. Ryan, J.J. Kehayias, **R.A. Fielding**, and W.J. Evans. Plasticity of Human Skeletal Muscle in Very Old Age: IGF-1 and Developmental Myosin Expression and Ultrastructural Damage after Weight-lifting Exercise in the Boston FICSIT Study. *Am. J. Physiol.*, 277: E135-E143, 1999. PMID: 14652104

2. **Fielding, R.A.**, N.K. LeBrasseur, A. Cuoco, J.F. Bean, K. Mizer, and M.A. Fiatarone-Singh. High velocity power training increases skeletal muscle strength and power in community-dwelling older women. *J. Am. Geriatr. Soc.* 50: 655-662, 2002. PMID:11982665
3. Ouellette, M.M., N.K. LeBrasseur, J.F. Bean, E. Phillips, J. Stein, W.R. Frontera, **R.A. Fielding**. High-intensity resistance training improves muscle strength, self-reported function and disability in long-term stroke survivors. *Stroke*. 35: 1404-1409, 2004. PMID:15105515
4. Giresi, P., E. Stevenson, J. Theilhaber, A. Koncarevic, J. Parkinson, **R.A. Fielding**, S.C. Kandarian. Identification of a molecular signature of sarcopenia. *Physiol. Genom.* 21: 253-263, 2005. PMID:15687482
5. LeBrasseur, N.K., K.C. Mizer, J.D. Parkinson, D.B. Sawyer, **R.A. Fielding**. Expression of neuregulin and erbB receptors in human skeletal muscle: effects of progressive resistance training, *Eur. J. Appl. Physiol.* 94: 371-375, 2005. PMID: 15875210
6. LIFE Study Investigators (writing group: Pahor, M., S. Blair, M. Espeland, **R.A. Fielding**, T.M. Gill, J.M. Guralnik, E.C. Hadley, A.C. King, S.B. Kritchevsky, C. Maraldi, M.E. Miller, A. B. Newman, W.J. Rejeski, S. Romashkan). Effects of a physical activity intervention on measures of physical performance: Results of the Lifestyle Interventions and Independence for Elders pilot (LIFE-P) study. *Journal of Gerontology: Medical Sciences*: 61A: 1157-1165, 2006. PMID: 17148967
7. **Fielding, R.A.**, J. Katula, M. Miller, K. Abbott-Pillola, A. Jordan, N.W. Glynn, B. Goodpaster, M. Walkup, A. Jordan, N.W. Glynn, B. Goodpaster, M. Walkup, A. King, W.J. Rejeski for the LIFE study investigators. Activity adherence and physical function in older adults with functional limitations. *Med. Sci. Sports Exerc.* 39:1997-2004, 2007.
8. Frontera, W.R., K.F. Reid, E.M. Phillips, L.S. Krivickas, V.A. Hughes, R. Roubenoff, **R.A. Fielding**. Muscle fiber size and function in elderly humans. *J. Appl. Physiol.* 105: 637-642, 2008. PMCID: PMC2519941
9. Chalé-Rush, A., J.M. Guralnik, M.P. Walkup, M.E. Miller, W. Jack Rejeski, J.A. Katula, A.C. King, N.W. Glynn, T.M. Manini, S.N. Blair, **R.A. Fielding**. Relationship between physical functioning and physical activity in the Lifestyle Interventions and Independence for Elders Pilot (LIFE-P). *J. Am. Geriatr. Soc.* 58(10): 1918-1924, 2010. PMID: 20738437 PMCID: PMC2952066
10. Clark, D.J., C. Patten, K.F. Reid, R.J. Carabello, E.M. Phillips, **R.A. Fielding**. Muscle performance and physical function are associated with voluntary rate of neuromuscular activation in older adults. *J Gerontol : Med Sci.* 2011 Jan;66(1):115-21. Epub 2010 Sep 9. PMID:20829294 PMCID: PMC3011959

D. RESEARCH SUPPORT

Ongoing Research Support

58-1950-0-014

Fielding (PI)

10/01/09-09/30/14

USDA/Agricultural Research Service

Nutrition, Physical Activity, and Sarcopenia in the Elderly

This grant supports the core functions of the Nutrition, Exercise Physiology and Sarcopenia Laboratory and its mission is to conduct research into how exercise and diet can influence age-related loss of skeletal muscle mass and function (sarcopenia). Projects include both human and animal studies, ranging from the molecular level to population-based observational and intervention studies.

U01 AG022376-08

Pahor (PI)

09/30/09-11/30/15

NIH/NIA

Lifestyle Interventions for the Elderly (LIFE)

The major goal of the project is to conduct a pilot randomized controlled trial to compare a structured physical exercise program with a health education control in sedentary older persons at risk of disability.

Role: Principal Investigator of Tufts' subcontract

P30 AG031679-05

Bhasin (PI)

09/01/08-05/31/13

NIH/NIA

Boston Older Americans Independence Center: A Translational Approach to Function Promoting Anabolic Therapies

The major goals of the Boston OAIC are to expedite the translation of research results into evidence-based function promoting anabolic therapies and to nurture a new generation of aging researchers.

Role: Principal Investigator of Tufts' subcontract

R24 HD065688-03

Jette (PI)

09/23/10-05/31/14

NIH/NIA

The overall aim of the Performance-based Measures core is to improve and expand the utilization of performance-based measures of physical functioning in clinical trials of medical rehabilitation.

This is a pilot study to examine the effect of potassium bicarbonate supplementation on net acid excretion during energy restriction.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Kolanowski, Ann M.	POSITION TITLE		
eRA COMMONS USER NAME akolanowski	Elouise Ross Eberly Professor of Nursing		
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
College of Misericordia	BS	1970	Nursing
Penn State University	MS	1980	Adult Health & Aging
New York University	Ph.D.	1989	Nurs Res & Theory Dev
University of Pennsylvania	Post-Doctoral	1992	Teaching Nursing Home
University of Michigan	Post-Doctoral	1994	Res Fellow/Neurobehav

A. Personal Statement

I am qualified to serve as a member of the external advisory board by virtue of my 20 years of research productivity as a clinical trialist and by my over 15 years of mentorship to graduate students. I have been principal investigator/co-investigator on a number of NIH, foundation, and internally-funded studies that have investigated factors related to behavioral symptoms in persons with dementia, and non-drug interventions for these symptoms. I recently completed an NINR-funded clinical trial on the efficacy of an activity intervention for behavioral symptoms in nursing home residents with dementia. I am currently a principal investigator on an NINR-funded study that is testing the efficacy of cognitively stimulating recreational activities for delirium in persons with dementia. In all of these projects, I actively mentor undergraduate and graduate students in research design and methodology. As Director of the Hartford Center of Geriatric Nursing Excellence I provide leadership in the School of Nursing, and support faculty who mentor graduate students with an interest in geriatric nursing research. During my tenure in research-intensive universities I have mentored over 17 pre-doctoral students, including two Hartford Foundation scholars. Additionally, I have been advisor/on the advisory board to two post-doctoral students: one the recipient of a Hartford Fagin Fellowship (Dr. Fang Yu) and the other a K99/R001 Award (Dr. Amy Sawyer). I am mentor to many junior faculty and currently advise Dr. Rita Jablonski, a Brookdale Fellow. My teaching responsibilities include undergraduate and graduate level courses on research methodology and dissertation development. Two of these courses are particularly germane to this application: *Teaching the Translation of Nursing Science into Practice* and a colloquium on *Becoming A Nurse Scientist*.

B. Positions and Honors

Positions and Employment

1971-72	Faculty	Instructor	Mercy Hospital
1976-77	Faculty	Instructor	Luzerne County Community College
1979-80	Faculty	Instructor	Wilkes College
1980-86	Faculty	Assistant Professor, Tenured	Wilkes College
1986-87	Acting Chair	Assistant Professor	Wilkes College Dept. of Nursing
1987-95	Chairperson	Associate Professor	Wilkes University Dept. of Nursing
1995-98	Chairperson	Professor	Wilkes University Dept. of Nursing
1998-2001	Chairperson	Professor	Medical College of Georgia Department of Adult Nursing
1999-2001	Faculty	Professor, Tenured	Medical College of Georgia School of Graduate Studies
2000-2001	Interim Chair		Medical College of Georgia Dept. of Mental Health/Psychiatric Nursing
2001-present	Faculty	Professor, Tenured	Penn State University

2001-present Faculty Affiliate
2007- present Center Director

The Gerontology Ctr., Penn State Univ.
Hartford Center of Geriatric Nursing
Excellence at Penn State Univ.

Other Experience and Professional Memberships

1983 Member, Zeta Psi Chapter, Sigma Theta Tau
1985 Member, American Nurses Association
1995 Member, Eastern Nursing Research Society
2001 Faculty Affiliate, The Gerontology Center, Penn State University
2001 Board Member, Geriatric Interest Network, Centre County, PA
2002 Fellow Gerontological Society of America, Health Sciences Section
2002 Editorial Board, Nursing & Health Sciences, Research in Gerontological Nursing
2003-current Review Panel Member, Journal of Gerontological Nursing, Archives of Psychiatric Nursing, Applied Nursing Research, Gerontologist, Journal of Gerontology: Psychological Sciences
2003 Fellow American Academy of Nursing
2004 Fran and Holly Soitsman Award for Excellence in Health Services Research
2006 John A. Hartford Geriatric Nursing Research Award, Eastern Nursing Research Society
2007 Elouise Ross Eberly Professor of Nursing

Most relevant to the current application

Kolanowski, A. M., Litaker, M., Buettner, L., Moeller, J., & Costa, P. (2011). A Randomized Clinical Trial of Theory-based Activities for the Behavioral Symptoms of Dementia in Nursing Home Residents. *Journal of The American Geriatrics Society*. 59(6), 1032-1041.

Kolanowski, A, Fick, D, Litaker, M, Clare, L, Leslie, D, Boustani, M. (2011). Study protocol for the recreational stimulation for elders as a vehicle to resolve delirium superimposed on dementia. *Trials* [doi 10.1186/1745-6215-12-119], 12(119).

Kolanowski, A., Fick, D., Clare, L., Therrien, B., & Gill, D. (2010). An intervention for delirium superimposed on dementia based on cognitive reserve theory. *Aging and Mental Health* 14 (2), 232-242.

Whall, A., Colling, K., Kolanowski, A., Kim, H., Son Hong, G., DeCicco, B., Ronis, D., Richards, K., Algase, D., Beck, C. (2008). Factors associated with aggressive behavior among nursing home residents with dementia. *The Gerontologist* 48, 721-731.

Kolanowski, A., Hoffman, L., & Hofer, S. (2007). Concordance of self-report and informant assessment of emotional well-being in nursing home residents with dementia. *The Journal of Gerontology: Psychological Sciences*, 62B, (1), 20-27.

Kolanowski, A. M., Litaker, M., & Buettner, L. (2005). Efficacy of theory-based activities for behavioral symptoms of dementia. *Nursing Research*, 54, 219-228.

Additional recent publications of importance to the field (in chronological order)

Hill, N., Kolanowski, A., Milone-Nuzzo, P. & Yevchack, A. (2011). Culture change models and resident health outcomes in long-term care. *Journal of Nursing Scholarship*, 43 (1), 30-40.

Kolanowski, A., Fick, D., Fraser, C. & Penrod, J. (2010). It's about time: Use of non-pharmacological interventions in the nursing home. *Journal of Nursing Scholarship*, 42 (2), 214-222.

Kolanowski, A., Fick, D., Campbell, J., Litaker, M., & Boustani, M. (2009). A preliminary study of anticholinergic burden and relationship to a quality of life indicator, engagement in activities, in nursing home residents with dementia. *Journal of the American Medical Director's Association*, 10 (4), 252-257.

- Yu, F., Ryan, L, Willis, S., Schaie, W. & Kolanowski, A. (2009). Factors associated with cognition in older adults: The Seattle longitudinal study. *Research in Nursing & Health*, 32(5), 540-550.
- Lingler, J., Jablonski, R., Bourbonniere, M., & Kolanowski, A. (2009). Informed consent to research in long-term care settings. *Research in Gerontological Nursing* 2 (3), 153-161.
- Haidet, K., Tate, J., Divirgilio-Thomas, D. Kolanowski, A., & Happ, MB. (2009). Using video recording to capture behavioral observations in clinical research: Methods to improve reliability of data. *Research in Nursing & Health*, 32(4), 465-474.
- Yu, F., Kolanowski, A., Strumpf, N., & Eslinger, P. (2006). Improving cognition and function through exercise intervention in Alzheimer's Disease. *Journal of Nursing Scholarship*, 38 (4), 358-365.
- Kolanowski, A. & Piven, M. (2006). Geropsychiatric nursing: State of the science. *Journal of the American Psychiatric Nurses Association*, 12, (2), 75-99.
- Fick, D., Kolanowski, A., Waller, J., Inoyue, S. (2005). Delirium superimposed on dementia in a community-dwelling managed care population: A 3-year retrospective study of occurrence, costs, and utilization. *Journal of Gerontology: Medical Sciences*, 60A, 748-753.
- Algase, D.L., Beck, C., Kolanowski, A., Whall, A., Berent, S., Richards, K., & Beattie, E. (1996). Need-driven dementia- compromised behavior: An alternative view of disruptive behavior. *American Journal of Alzheimer's Disease*, 11(6), 10 & 12-19.

D. Research Support

Ongoing Research Support

R01 NR012242	Kolanowski & Fick (MPI)	9/09/10- 6/30/15
NIH/NINR		
RESERVE For Delirium Superimposed on Dementia (DSD)		
The purpose of this RCT is to test the efficacy of cognitive stimulation, in the form of recreational activities, for resolving DSD.		
Role: Principal Investigator		
R01 NR011042	(Fick,PI)	4/01/10 to 2/28/15
NIH/NINR		
Early Nurse Detection of Delirium Superimposed on Dementia-END-DSD.		
This study is testing a multi-component intervention for the early diction and treatment of delirium superimposed on dementia in hospitalized older adults. D. Fick, PI		
Role: Co-Investigator		
Hartford Center of Geriatric Nursing Excellence		10/01/07- 9/30/2012
John A. Hartford Foundation		
Extending A Local Solution to Address A National Crisis		
The focus of this center is to prepare an increased number of geriatric nursing faculty who can teach in geographical areas of greatest need.		
Role: Principal Investigator		
1R01NR012737 – 01	(Jablonski, PI)	4/1/2011-3/30/2015
NIH/NINR		
Reducing Care-Resistant Behaviors During Oral Hygiene in Persons with Dementia		
The primary goal of this study is to test the efficacy of an intervention to reduce care-resistant behavior and improve oral health in persons with dementia by means of a randomized controlled trial.		

Role: Co-Investigator

R00 NR011173 (Sawyer, PI)

4/4/11 - 3/31/14

NIH/NINR

Risk Assessment and Tailored Intervention to Improve CPAP Adherence

The study aims are to determine the effect size, feasibility, and acceptability of a tailored intervention on continuous positive airway pressure therapy (CPAP) adherence among newly-diagnosed obstructive sleep apnea (OSA) patients.

Role: Co-Investigator

Completed Research

R01 NR008910-01

Kolanowski (PI)

3/01/2005-2/28/2009; NCE: 3/01/09- 2/28/2010

NIH/NINR

A Prescription to Enhance Resident Quality of Life

This study is testing the efficacy of individualized recreational activities for responding to the behavioral symptoms of dementia.

Role: Principal Investigator

Kolanowski (PI)

Fick (Co-I)

11/01/2008 – 10/31/2009

Social Science Research Institute Penn State

Title: Innovation For Delirium Superimposed on Dementia: The IMPACT-DSD Pilot Project

Role: Co-PI

R01 NR004568

Whall (PI)

9/1/99 – 5/31/04

NIH/NINR

Aggressive Physical Behavior: Background and Proximal Factors

This correlational study is testing a mid-range theory, the Need-driven Dementia-compromised Behavior Model to determine which factors (background) place persons with dementia at risk for aggressive behaviors, and under which conditions (proximal factors) they are expressed.

Role: Co-Investigator

R01 NR04569

Algase (PI)

9/1/99 – 5/31/04

NIH/NINR

Wandering: Background and Proximal Factors

This correlational study is testing a mid-range theory, the Need-driven Dementia-compromised Behavior Model to determine which factors (background) place persons with dementia at risk for wandering, and under which conditions (proximal factors) they are expressed.

Role: Site Principal Investigator on sub-contract

R15 NR08148

Kolanowski (PI)

1/1/02 – 12/31/03

Theory-based Activities for Dementia Behaviors

This study is a clinical cross-over design that is testing the efficacy of activities derived from the Need-driven Dementia-compromised Behavior Model for responding to agitation and passivity in persons with dementia.

Role: Principal Investigator

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Rebok, George W.	POSITION TITLE Professor		
eRA COMMONS USER NAME (credential, e.g., agency login) grebok1			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
Muhlenberg College, Allentown, PA	B.A.	1972	Psychology
Syracuse University, Syracuse, NY	M.A.	1976	Dev. Psychology
Syracuse University, Syracuse, NY	Ph.D.	1977	Dev. Psychology
Johns Hopkins University, Baltimore, MD	Post-doc	1989	Dementias of Aging

A. Personal Statement

The proposed T32 focuses on training researchers who can investigate antecedents of functional independence in late life (with a particular focus on mobility and cognitive factors), and who will develop expertise in the design, implementation and evaluation of interventions to promote independence and reduce disability. I have the expertise, background, and experience to serve as a member of the external review group for this project. I received my doctoral training in life-course developmental psychology from Syracuse University, with a focus on gerontology and cognitive aging, and postdoctoral training in epidemiology, biostatistics, neuroscience, psychiatric disorders, and the dementias of aging at Johns Hopkins University. My research has included studies on cognitive interventions with the elderly and the effects of aging and dementia on driving and other everyday functional tasks. I am currently PI of the NIA/NINR-funded ACTIVE (Advanced Cognitive Training for Independent and Vital Elderly) study in Baltimore, Maryland where one of my roles has been to chair the national Steering Committee for this multi-site, randomized intervention trial with an ethnically and geographically diverse sample of over 2,800 community-dwelling older adults. I also serve as Principal Investigator for the NIA-funded randomized, controlled trial of the Baltimore Experience Corps® which places older volunteers in high-impact roles in public urban elementary schools. Over my 35-year career, I have published numerous peer-reviewed articles and book chapters on identification of early risk and protective factors on later life cognitive health and daily function; prevention of age-related cognitive decline, memory loss, depression, and disability; and the short- and long-term outcomes of cognitive intervention trials. As a member of the Executive Committee and recently appointed Co-Director of the NIA-funded Aging and Cognitive Disorders Training Program (Dr. Marilyn Albert, Director), I have had the opportunity to mentor numerous predoctoral and postdoctoral students and contribute to monthly discussions on topics related to career building, professional networking, grant writing, and research publications. I also serve on the training faculty for the NIMH-funded Prevention Research Training and Psychiatric Epidemiology Training Programs, and the NIA-funded Epidemiology and Biostatistics of Aging Program. In recognition of my efforts in advising students, I recently received the Advising, Mentoring & Teaching Recognition Award (AMTRA) from the Johns Hopkins Bloomberg School of Public Health. I also recently chaired the Behavioral and Social Sciences Section Distinguished Mentorship Award Subcommittee for the Gerontological Society of America. In summary, I have a record of accomplishment in the area of life-course development and aging from an interdisciplinary perspective that will enable me to contribute to the training and mentoring of predoctoral researchers. I have also worked with Dr. Marsiske for over 15 years analyzing cognitive training outcomes from the ACTIVE intervention trial and collaborating on numerous scientific papers and presentations.

B. Positions and Honors

Positions and Employment

1977-80	Assistant Professor, Department of Psychology, California State University, Long Beach, CA
1980-88	Associate Professor, Department of Psychology, State University of New York, Geneseo, NY
1987-89	Postdoctoral Fellow, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University, Baltimore, MD
1989-03	Associate Professor/Associate Scientist, Department of Mental Hygiene, Johns Hopkins University, Baltimore, MD
1994-	Joint Faculty Appointment, Department of Psychiatry and Behavioral Sciences, Johns Hopkins University, Baltimore, MD
2003-	Professor, Department of Mental Health, Johns Hopkins University, Baltimore, MD

Other Experience and Professional Memberships

1977-pres.	Member, Gerontological Society of America
1977-pres.	Member, American Psychological Association
1988-pres.	Member, American Psychological Society
1990-pres.	Member, International Neuropsychological Society
1992-pres.	Member, American Public Health Association
1994-pres.	Editorial Boards, <i>Journal of Gerontology: Psychological Sciences</i> , <i>Experimental Aging Research</i> , <i>Cognitive Technology</i> , <i>International Journal of Aging and Human Development</i>
2000-pres.	Scientific Advisory Board, Institute for the Study of Aging
2003-2006	Chair, Steering Committee, ACTIVE multisite randomized clinical trial, NIA/NINR
2005-2006	Co-Organizer, Cognitive Activity from Bedside to Bench, AGS/NIA, R13 Conference
2007	Co-Organizer, Cognitive Aging Summit, NIA/McKnight Foundation
2008	Member, Cognitive Interventions Subcommittee, NIA
2008	Member, Brain Science Institute Planning Committee, Johns Hopkins University
2010	Chair, Behavioral and Social Sciences Section Distinguished Mentorship Award Subcommittee, Gerontological Society of America

Honors

1972	Phi Beta Kappa, Muhlenberg College
1987	National Research Service Award, Johns Hopkins University
1989	Fellow, Gerontological Society of America
1993	Fellow, American Psychological Association, Division 20
2002	Research Fellow, Johns Hopkins Center on Aging and Health
2004	Delta Omega, Alpha Chapter
2004	Fellow, American Psychological Society
2009	Gary Andrews Visiting Fellow, Australian Association of Gerontology
2011	Advising, Mentoring, Teaching Recognition Award (AMTRA), Johns Hopkins Bloomberg School of Public Health

C. Selected Peer-reviewed Publications (Selected from >140 peer-reviewed publications)

Most relevant to the current application

1. Willis, S.L., Tennstedt, S.L., Marsiske, M., Ball, K., Elias, J., Koepke, K.M., Morris, J.N., Rebok, G.W., Unverzagt, F.W., Stoddard, A.M., & Wright, E. (2006). Long-term effects of cognitive training on everyday functional outcomes in older adults. *JAMA*, 296, 2805-2814.
 2. Rebok, G.W., Carlson, M.C., & Langbaum, J.B.S. (2007). Training and maintaining memory abilities in healthy older adults: Traditional and novel approaches. *Journal of Gerontology: Psychological Sciences*, 62B, 53-61.
 3. Tan, E.J., Tanner, E.K., Seeman, T.E., Xue, Q-L., Rebok, G.W., Frick, K.D., Carlson, M.C., Wang, T., Piferi, R.L., McGill, S., Whitfield, K.E., & Fried, L.P. (2010). Marketing public health through older adult volunteering: Experience Corps® as a social marketing intervention. *American Journal of Public Health*, 100, 727-734.
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4. Parisi, J.M., Gross, A.L., Rebok, G.W., Saczynski, J.S., Crowe, M., Cook, S.E., Langbaum, J.B.S., Sartori, A., & Unverzagt, F.W. (2011). Modeling change in memory performance and memory perceptions: Findings from the ACTIVE study. *Psychology and Aging*, 26, 518-524.
5. Gross, A.L., & Rebok, G.W. (2011). Memory training and strategy use in older adults. Results from the ACTIVE cognitive intervention trial. *Psychology and Aging*, 26, 503-517.

Additional recent publications of importance to the field (in chronological order)

1. Ball, K., Berch, D.B., Helmers, K.F., Jobe, J.B., Leveck, M.D., Marsiske, M., Morris, J.N., Rebok, G.W., Smith, D.M., Tennstedt, S.L., Unverzagt, F.W., & Willis, S.L. (2002). Effects of cognitive training interventions with older adults : A randomized controlled trial. *JAMA*, 288, 2271-2281.
2. Cahn-Weiner, D.A., Malloy, P.F., Rebok, G.W., & Ott, B.R. (2003). Results of a randomized placebo-controlled study of memory training for mildly impaired Alzheimer's disease patients. *Applied Neuropsychology*, 10, 215-223.
3. Saczynski, J.S., Rebok, G.W., Whitfield, K.E., & Plude, D.J. (2004). Effectiveness of CD-ROM memory training as a function of within-session autonomy. *Cognitive Technology*, 9, 24-32.
4. Studenski, S., Carlson, M.C., Fillit, H., Greenough, W.T., Kramer, A., & Rebok, G.W. (2006). From bedside to bench: Does mental and physical activity promote cognitive vitality in later life? *Science Aging Knowledge Environment*, 10, pe21.
5. Carlson, M.C., Saczynski, J.S., Rebok, G.W., Seeman, T., Glass, T.A., McGill, S., Tielsch, J., Frick, K., Hill, J., Fried, L.P. (2008). Exploring the effects of an "everyday" activity program on executive function and memory in older adults: Experience Corps®. *Gerontologist*, 48, 793-801.
6. Rebok, G.W. (2008). Cognitive training: Influence on neuropsychological and brain function in later life. State-of-Science Review: SR:E22. UK Government Foresight Mental Capital and Mental Wellbeing Project. Government Office for Science.
7. Unverzagt, F.W., Smith, D.M., Rebok, G.W., Marsiske, M., Morris, J.N., Jones, R., Willis, S.L., Ball, K., King, J.W., Koepke, K.M., Stoddard, A., & Tennstedt, S.L. (2009). The Indiana Alzheimer Disease Center's Symposium on Mild Cognitive Impairment: Cognitive training in older adults: lessons from the ACTIVE Study. *Current Alzheimer Research*, 6, 375-383.
8. Carlson, M.C., Erickson, K.I., Kramer, A.F., Voss, M.W., Bolea, N., Mielke, M., McGill, S., Rebok, G.W., Seeman, T., & Fried, L.P. (2009). Evidence for neurocognitive plasticity in at-risk older adults: The Experience Corps Program. *Journal of Gerontology: Medical Sciences*, 64A, 1275-1282.
9. Langbaum, J.B., Rebok, G.W., Bandeen-Roche, K., & Carlson, M.C. (2009). Predicting memory training response patterns: Results from ACTIVE. *Journal of Gerontology: Psychological Sciences*, 64B, 14-23.
10. Gross, A.L., Rebok, G.W., Unverzagt, F.W., Willis, S.L., Brandt, J. (2011). Word list memory predicts everyday function and problem-solving in the elderly: Results from the ACTIVE cognitive intervention trial. *Aging Neuropsychology, and Cognition*, 18, 129-146.

D. Research Support

Ongoing Research Support

P01 AG027735-01 (Rebok)	07/01/06-06/30/12	4.2 months
NIH/NIA	\$1,096,764	
Experience Corps Trial: Improving health of older populations through generativity		
The goal of this project to conduct a randomized controlled trial of the effectiveness of the Experience Corps Program in preventing or delaying physical disability in older volunteers and improving the educational outcomes for young children.		
Role: PI		
1U01AG14260-01 (Rebok)	07/01/08-5/31/12	3 months
NIH/NIA	\$323,999	

ACTIVE Phase III: JHU Field Site

The goal of this study is to determine if the ACTIVE cognitive interventions continue to have long-term protective effects on everyday function, to document any delayed transfer of the cognitive intervention effects on mobility, driving, health-service utilization, and health-related quality of life, and to determine if the effects of cognitive interventions on the cognitive abilities are durable.

Role: PI

R01AG03493 (Mintzer)	07/01/10-6/30/13	0.6 months
NIH/NIA	\$267,800	

A theoretically based memory training intervention in mild cognitive impairment.

The objective of this study is to test the effects of a repetition lag training procedure, which targets training the prefrontal cortex, on cognitive performance, everyday function, quality of life, and neuropsychiatric symptoms in individuals with amnesic Mild Cognitive Impairment (aMCI).

Role: Co-I

Completed Research Support

R01 AA009963-13 (Li)	7/01/06-06/30/11	1.2 months
NIAAA	\$327,700	

Alcohol in aviation and motor carriers

The goal of this study is to better understand the role of alcohol in aviation and motor carrier accidents and to improve transportation safety.

Role: Co-I

R01AG13642 (Li)	7/01/03-6/30/08	1.8 months
Pilot Aging and Aviation Safety	\$322,326	

The goal of this study was to determine age-related variations in the relative risk of crash involvement for commercial aviation pilots, to examine age-related variations in pilot errors in airline/air taxi crashes, and to disseminate the results to scientific and public communities and make relevant policy recommendations.

Role: Co-I

R01AG198525 (Carlson)	09/30/02-09/29/07	1.8 months
Cognitive pathways to disability	\$285,750	

This study complemented the Women's Health and Aging Study II to understand how age-related changes in various domains of cognition may exert downstream effects on physical function and the implementation of compensatory strategies.

Role: Co-I

R01MH47447 (Eaton)	07/01/02-06/30/07	1.2 months
Evolution of psychopathology in the population	\$705,716	

This project aimed to follow-up the Baltimore ECA sample, focusing on the natural history of psychopathology in middle-aged and elderly adults, and the consequences of psychopathology for physical conditions, functioning, use of health and mental health services, and mortality.

Role: Co-I

1U01AG14260-01 (Rebok)	07/01/03-12/31/06	2.4 months
ACTIVE Phase II: JHU Field Site	\$322,326	

The goal of this study was to determine whether the cognitive interventions from ACTIVE Phase I (as initial treatment or as a consequence of repeated boosters) have long-term protective effects on functional outcomes and to identify individual factors that affect response to intervention

Role: PI

Table 1. Membership of Participating Departments and Programs (Renewal/Revision Applications)

Participating Department or Program	Faculty Members In Department or Program*	Faculty Members Participating in This Application	Predocctoral Trainees in Department or Program [Supported by Any NIH Training Grant]	Predocctoral Trainees With Participating Faculty Total (TGE) A/B/C**	Predocctoral Trainees Supported by This Training Grant Total (TGE) A/B/C	Postdoctoral Trainees in Department or Program [Supported by Any NIH Training Grant]	Postdoctoral Trainees With Participating Faculty Total (TGE) A/B/C**	Postdoctoral Trainees Supported by This Training Grant Total (TGE) A/B/C
Adult & Elderly Nursing (Nursing)	12	3 Horgas, A. Neff, D. Roberts, B.	1[0]	1(1) 0/0/0	0(0) 0/0/0	0[0]	0(0) 0/0/0	0(0) 0/0/0
Aging (Medicine)	9	6 Anton, S. Buford, T. Cohen, R. Leeuwenburgh, C. Manini, T. Pahor, M.	4[0]	2(0) 0/0/0	0(0) 0/0/0	1[0]	0(0) 0/0/0	0(0) 0/0/0
Applied Physiology & Kinesiology (Health & Human Performance)	18	1 Hass, C.	41[1]	4(3) 0/0/0	1(1) 0/0/0	10[1]	1(1) 0/0/0	0(0) 0/0/0
Clinical & Health Psychology (Public Health & Health Professions)	15	9 Bauer, R. Bowers, D. Dotson, V. Marsiske, M. McCrae, C. Perlstein, W. Perri, M. Price, C. Robinson, M.	76[4]	43(43) 7/0/0	4(4) 1/0/0	3[0]	1(1) 0/0/0	0(0) 0/0/0
Neuroscience (Medicine)	23	1 Foster, T.	31[1]	3(1) 0/0/0	0(0) 0/0/0	15[0]	0(0) 0/0/0	0(0) 0/0/0

Participating Department or Program	Faculty Members In Department or Program*	Faculty Members Participating in This Application	Predoctoral Trainees in Department or Program [Supported by Any NIH Training Grant]	Predoctoral Trainees With Participating Faculty Total (TGE) A/B/C**	Predoctoral Trainees Supported by This Training Grant Total (TGE) A/B/C	Postdoctoral Trainees in Department or Program [Supported by Any NIH Training Grant]	Postdoctoral Trainees With Participating Faculty Total (TGE) A/B/C**	Postdoctoral Trainees Supported by This Training Grant Total (TGE) A/B/C
Occupational Therapy (Public Health & Health Professions)	4	1 Mann, W.	3[0]	1(1) 1/0/0	0(0) 0/0/0	1[0]	0(0) 0/0/0	0(0) 0/0/0
Psychology (Liberal Arts & Sciences)	27	5 Abrams, L. Bluck, S. Ebner, N. Tucker, C. West, R.	89[0]	12(9) 3/0/0	0(0) 0/0/0	3[0]	0(0) 0/0/0	0(0) 0/0/0
Speech Language & Hearing (Public Health & Health Professions)	15	1 Altmann, L.	26[0]	5(3) 1/0/0	0(0) 0/0/0	1[0]	0(0) 0/0/0	0(0) 0/0/0
Totals	Need not sum	Need not sum	269[6]	68(61) 12/0/0	5(5) 1/0/0	34[1]	2(2) 0/0/0	0(0) 0/0/0

**Tenure/tenure track faculty*

***Data on individuals with disabilities or disadvantaged backgrounds is not available*

**Table 2. Participating Faculty Members
(Alphabetically by Faculty Member)**

Name/Degree(s)	Rank	Primary (& Secondary) Appointment(s)	Role in Program	Research Interest
Abrams, Lise, PhD	Associate Professor	Psychology	Mentor	Investigate memory and language processes in younger and older adults; Interactive activation theories of language production
Altmann, Lori, PhD	Associate Professor	Speech Language Hearing	Junior Mentor	Language, executive function and basal ganglia disease; Exercise interventions on dual task processing in Parkinson disease
Anton, Steven, PhD	Assistant Professor	Aging	Mentor	Health promotion, preventive medicine, and healthy weight management. His research focuses on developing and testing the efficacy of lifestyle based and alternative treatment modalities for preventing and treating metabolic conditions associated with aging, such as obesity and type 2 diabetes.
Bauer, Russell, PhD, ABPP	Professor	Clinical and Health Psychology	Mentor	Differential diagnosis and preclinical detection of dementia; Hippocampal contributions to spatial memory; Structure-function relationships in memory
Bluck, Susan, PhD	Associate Professor	Psychology	Mentor	Social cognition across the lifespan; Lifespan differences and continuities in: autobiographical memory, reminiscence, and the life story; Autobiographical memory abilities and the relation of memory to the self
Bowers, Dawn, PhD	Professor	Clinical and Health Psychology	Mentor	Neuropsychology of Emotion; Basal Ganglia and Limbic Functions in Emotion; TMS; Psychophysiology; Laterality; Forensic Neuropsychology
Buford, Tom, PhD	Assistant Professor	Aging	Mentor	Sarcopenia and Age-related Functional Decline; Sources of variability in responsiveness to exercise; Methods to enhance the efficacy of exercise on functional outcomes
Cohen, Ronald L.	Professor and Director	Aging	Mentor	Neuroimaging; Age-associated cognitive and brain dysfunction, Neurodegenerative disorders (e.g., Alzheimer's disease, vascular dementia, MCI); HIV-associated neurocognitive dysfunction, Cardiovascular-associated brain dysfunction; Biomarker discovery.
Cook, Robert	Associate Professor	Epidemiology	Mentor	Clinical epidemiology; improving outcomes in persons with HIV infection. Recent work focuses on aging, including impact of aging with HIV on cognitive function, comorbidity of chronic disease outcomes associated with aging related to HIV.
Dotson, Vonetta, PhD	Assistant Professor	Clinical and Health Psychology	Junior Mentor	Geriatric Neuropsychology; Late-life Depression; Subthreshold Depression; Cognitive Neuroscience
Ebner, Natalie, PhD	Assistant Professor	Psychology		Development and interplay of motivational, emotional, and cognitive processes across the lifespan. Goal selection and goal pursuit as processes of developmental regulation. Approach and avoidance orientation in adulthood. Lifespan changes in cognitive processing of socially relevant information. Age-related differences in perception of, attention to, and memory for human faces.
Foster, Thomas, PhD	Professor	Neuroscience	Mentor	Mechanisms of age-related memory decline
Hass, Chris, PhD	Associate Professor	Applied Physiology and Kinesiology	Mentor	Interactions between musculoskeletal biomechanics and sensorimotor control of lower extremity function; Coordination and balance; Efficacy of intervention programs for improving quality of life, neuromechanical control, and disease progression in Parkinson's disease; Dynamic stability during locomotor transitions in the elderly and PD
Horgas, Ann, PhD, RN, FAAN	Associate Professor	Adult and Elderly Nursing	Mentor	Aging; Pain management in persons with dementia

Name/Degree(s)	Rank	Primary (& Secondary) Appointment(s)	Role in Program	Research Interest
Leeuwenburgh, Christiaan, PhD	Professor	Aging and Geriatric Research	Mentor	Aging; Mitochondrial biology
Manini, Todd, PhD	Assistant Professor	Aging and Geriatric Research	Mentor	Physical exercise to prevent disability in healthy and frail older adults; Assess the mechanisms leading to sarcopenia and functional decline; Prevention of physical disability in older adults
Mann, William, PhD, OTR/L	Professor and Chair	Occupational Therapy	Mentor	Telehealth and home monitoring of older adults; Aging and independence studies; Rehabilitation of older adults; Needs of veterans with disabilities; Tools for driver assessment and rehabilitation
Marsiske, Michael, PhD	Associate Professor	Clinical and Health Psychology	Mentor	Cognitive Aging; Cognitive Intervention Strategies with Older Adults; Statistical modeling
McCrae, Christina, PhD	Associate Professor	Clinical and Health Psychology	Mentor	Sleep disorders; Efficacy of cognitive-behavioral interventions for insomnia in medical populations (pain, cardiac disease, cancer, etc.) and normal aging
Neff, Donna, PhD, APRN, BC	Associate Professor	Adult and Elderly Nursing	Mentor	Nurse/patient outcomes and organizational factors; Patient health outcomes; Improving the systems in which they receive care
Pahor, Marco, MD	Professor and Chair	Aging and Geriatric Research	Mentor	Geriatric Research, Physical Function, Disability, Epidemiology, Randomized Control Trials
Perlstein, William, PhD	Associate Professor	Clinical and Health Psychology	Mentor	Cognitive and emotion neuroscience; Parkinson disease; TBI; executive functions; fMRI and electrophysiological (ERP)
Perri, Michael, PhD, ABPP	Dean and Professor	Clinical and Health Psychology	Mentor	Health Promotion, Obesity, Exercise
Price, Catherine, PhD	Assistant Professor	Clinical and Health Psychology (Anesthesiology)	Junior Mentor	Adult Neuropsychology, Dementia, Movement Disorders, Post Operative Cognitive Dysfunction, White Matter and Cognition PI: White Matter and Cognition in Parkinson's Disease
Roberts, Beverly, PhD, FAAN, FGSA	Professor	Adult and Elderly Nursing	Mentor	Function and independence in daily activities, specifically exercise from a physical and psychosocial standpoint
Robinson, Michael, PhD	Professor	Clinical and Health Psychology (Anesthesiology, Physical Therapy)	Mentor	Health/Medical Psychology, Assessment and Management of Pain, Experimental Pain and Psychophysics, Rehabilitation, Psychophysiology
Tucker, Carolyn, PhD	Professor	Psychology	Mentor	Customized, culturally sensitive health promotion and health care, integrating health promotion in medicine and the development and the development and testing of community health worker training programs focusing on health promotion.
West, Robin, PhD	Professor	Psychology	Mentor	Everyday memory performance; Self-regulatory factors that influence memory performance, such as self-efficacy, goal setting, possible selves, control beliefs and strategies

Table 3. Institutional Training Grant Support Available to Participating Faculty Members, Department(s), or Program(s)

Title of Training Grant	Funding Source Including Identifying Number	Active or Pending Project Period	Program Director (Department)	Predoctoral Trainees Supported This Year	Postdoctoral Trainees Supported This Year	Short-Term Trainees Supported This Year	Total No. of Participating Faculty (Number Overlapping)	Names of Overlapping Faculty
Multidisciplinary Training Program in Hypertension	T32 HL083810-05	04/07-10/13	Baylis, C. (Physiology & Functional Genomics)	3	3	0	31 (1)	Leeuwenburgh
Training in the Neural Mechanisms, Cognition, and Epidemiology of Addiction	T32 DA035167-01	pending	Cottler, L. (Epidemiology)	4	4	0	21 (4)	Bowers Dotson Marsiske Robinson
Pre & Post-Doctoral Training in Nephrology & Hypertension	T32 DK007518-25	07/85-06/13	Segal, M. (Medicine)	3	2	0	25 (2)	Duncan Leeuwenburgh
Integrative and translational training in pain research	2T32NS045551-08	04/03-06/15	Yezierski, R. (Orthodontics)	0	4	0	11 (2)	Horgas Robinson
Totals	N/A	N/A	N/A	10	13	0	N/A	N/A

**Table 4. Grant and Contract Support of the Participating Faculty Members
(Alphabetically by Faculty Member)**

Faculty Member	Faculty Member Role on Project and Grant Title	Source of Support Grant Number and Status	Project Period	Current Year Direct Costs Awarded (Total Direct Costs for Awards With Substantial Future Changes)
Altmann, Lori J	Co-I; DANCE FOR LIFE: ASSESSING THE EFFECTS OF DANCE ON MOTOR AND NON-MOTOR FUNCTION IN PARKINSON'S DISEASE	PARKINSON'S DISEASE FOU,	01-Oct-2012-30-Mar-2014	8200.00
Altmann, Lori J	PI; LANGUAGE AND EXECUTIVE FUNCTION IN PARKINSON'S DISEASE	NATL INST OF HLTH, R21 AG033284	15-Jul-2010-30-Jun-2013	92344.00
Anton, Steve	PI; INVESTIGATIONS OF BOTANICALS ON FOOD INTAKE, SATIETY, WEIGHT LOSS, AND OXIDATIVE	NATL INST OF HLTH, K23 AT004251	01-Sep-2009-31-Aug-2014	247104.00
Bauer, Russell M	Co-I; ADVANCE STUDY: DBS-F THERAPY FOR ALZHEIMER'S DISEASE (AD)	FUNCTIONAL NEUROMODULATION, 7NM1-001	03-Aug-2012-02-Aug-2015	4455.00
Bauer, Russell M	Mentor; CALLIE DUNN-2012 APA DISSERTATION RESEARCH AWARD	AMER PSYCHOLOGICAL ASSO,	01-Nov-2012-31-Oct-2013	3250.00
Bauer, Russell M	Co-I; CONCUSSION AWARENESS IN THE COMMUNITY: OUTREACH, EDUCATION, AND ASSESSMENT	UNIV OF FLORIDA,	28-Feb-2012-28-Feb-2013	5401.00
Bauer, Russell M	Co-I; MAKING CONNECTIONS: ANATOMIC & BEHAVIORAL LINKS AMOUNG MTBI, MEMORY DYSFUNCTION & PTSD SYMPTOMS . . (PROJECT #4 TBI GRP)	UNIV OF FLORIDA,	01-Jan-2013-30-Jun-2013	33299.00
Bauer, Russell M	Co-I; UF-FSU COMMUNITY RESEARCH COLLABORATIVE PROGRAM IN PEDIATRICS, INTERNAL MEDICINE, AND FAMILY MEDICINE . . .	NATL INST OF HLTH, UL1 RR029890-03S3	25-May-2011-31-Mar-2012	39292.00
Bowers, Dawn	PI; EMOTION REGULATION, EXECUTIVE FUNCTION, AND PARKINSON DISEASE	NATL INST OF HLTH, R21 NS079767	01-Jun-2012-31-May-2014	122869.00

Bowers, Dawn	PI; NEW PLATFORM FOR MULTI-MODAL COGNITIVE ENHANCEMENT IN THE ELDERLY	UF FOU,	01-Nov-2009-31-Oct-2010	465.15
Bowers, Dawn	PI; PSYCHOPHYSIOLOGY OF EMOTION IN PARKINSONS DISEASE	NATL INST OF HLTH, F31 NS073331	16-May-2011-15-Oct-2014	52255.00
Bowers, Dawn	Co-I; SCHEDULED AND RESPONSIVE BRAIN STIMULATION FOR THE TREATMENT OF TOURETTE SYNDROME	NATL INST OF HLTH, R34 MH080764	17-Sep-2008-31-May-2012	15.17
Bowers, Dawn	Co-I; THE ROLE OF VISUAL ATTENTION IN THE DRIVING SAFETY OF PARKINSONS DISEASE PATIENTS	NATL PARKINSON FOU,	01-Jun-2010-31-Dec-2012	9011.19
Bowers, Dawn	PI: THE VITAL STUDY: THE VILLAGE INTERACTIVE TRAINING AND LEARNING STUDY	UF FOU,	01-Nov-2010-30-Apr-2013	310000.00
Buford, Thomas W	PI; CTSI: MUSCLE REGENERATION AND SARCOPENIA	NATL INST OF HLTH, KL2 RR029888	01-Apr-2011-31-Mar-2012	7395.00
Buford, Thomas W	PI; CTSI: MUSCLE REGENERATION IN SARCOPENIA	NATL INST OF HLTH, KL2 TR000065	01-Apr-2012-15-Aug-2012	6563.00
Buford, Thomas W	PI; UFF - CHATLOS FOUNDATION FUNDS	UF FOU, F008211	01-Mar-2013-28-Feb-2014	10000.00
Cohen, Ronald A	PI; ALCOHOL AND HIV: BIOBEHAVIORAL INTERACTIONS AND INTERVENTION(RESEARCH COMPONENT 2)	BROWN UNIV, P279354	01-Aug-2012-31-Aug-2013	50273.00
Cohen, Ronald A	Co-I; IMPROVING ADHERENCE AND COGNITION IN SUBSTANCE USING HIV	MIRIAM HOSPITAL, 710-9829	01-Sep-2012-31-Aug-2013	22457.00
Dotson, Vonetta M	PI; THE LIFE STUDY DIVERSITY SUPPLEMENT FOR VONETTA DOTSON	NATL INST OF HLTH, U01 AG022376	01-Feb-2012-30-Nov-2015	150896.00
Foster, Thomas C	PI; ESTROGEN AND COGNITION OVER THE LIFESPAN	NATL INST OF HLTH, R01 AG037984	15-Aug-2011-31-Jul-2016	410000.00
Foster, Thomas C	PI; MCKNIGHT CHAIR UFFND ENDOWMENT INCOME FUNDS TO ESTABLISH MEDICAL RESEARCH OF THE BRAIN	UF FOU, F007890	25-Nov-2009-24-Nov-2014	102531.77

Foster, Thomas C	PI; SIGNALING CASCADES AND MEMORY DEFICITS DURING AGING	NATL INST OF HLTH, R37 AG036800	30-Sep-2010-31-Aug-2014	262559.00
Hass, Chris J	Co-I; EFFECTS OF SINGING ON SPEECH AND SWALLOW IN PATIENTS WITH PARKINSONS DISEASE	UNIV OF ROCHESTER, 5-29289	01-Feb-2013-01-May-2013	.00
Hass, Chris J	PI; IPA - ELIZABETH STEGEMOLLER	US DEPT OF VETERANS AFFAIRS,	01-Jan-2012-02-Feb-2012	9450.84
Horgas, Ann L	Mentor: EFFECT OF PSYCHOSOCIAL FACTORS ON ACUTE AND PERSISTENT PAIN FOLLOWING CHILDBIRTH FOR CDR CAROLE ANN DANIEL	US DEPT OF DEFENSE, HT9404-12-1-TS04	08-May-2012-28-Feb-2014	8456.00
Horgas, Ann L	Co-I; NEUROIMAGING BIOMARKERS FOR POST-OPERATIVE COGNITIVE DECLINE IN OLDER ADULTS	NATL INST OF HLTH, R01 NR014181	27-Sep-2012-30-Jun-2017	241317.00
Horgas, Ann L	Co-I; PAIN TREATMENT DECISIONS: INFLUENCE OF SEX, RACE AND AGE	NATL INST OF HLTH, R01 DE013208	01-Sep-2009-31-Aug-2013	188831.10
Horgas, Ann L	Mentor: VITAMIN D HYPOVITAMINOSIS AND KNEE OSTEOARTHRITIS IN OLDER ADULTS FOR TONI GLOVER	GERONTOLOGICAL SOC OF AMERICA, 11-116	15-Aug-2011-14-Aug-2013	52050.00
Horgas, Ann L	Mentor: VITAMIN D HYPOVITAMINOSIS AND KNEE OSTEOARTHRITIS IN OLDER ADULTS FOR TONI GLOVER (MAY DAY FUNDS)	BUILDING ACAD GERIAT NURS CAPA, 11-116	15-Aug-2011-14-Aug-2013	5000.00
Leeuwenburgh, Christiaan	Core Leader: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) RC2 (AGING)	NATL INST OF HLTH, P30 AG028740-06	01-Jul-2006-31-Mar-2017	68999.00
Leeuwenburgh, Christiaan	Core Leader: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) RC2, RD1 (AGING)	NATL INST OF HLTH, P30 AG028740-06	01-Jul-2006-31-Mar-2017	31282.00
Leeuwenburgh, Christiaan	Core Leader: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) RCDC (AGING)	NATL INST OF HLTH, P30 AG028740-06	01-Jul-2006-31-Mar-2017	126370.00
Leeuwenburgh, Christiaan	Co-I IDENTIFICATION OF BIOMARKERS OF DIAPHRAGMATIC DYSFUNCTION IN MECHANICALLY VENTILATED PATIENTS	ELI LILLY AND CO,	17-Dec-2012-16-Dec-2013	21028.00

Leeuwenburgh, Christiaan	Co-I: MITOPHAGY: A NOVEL TARGET TO IMPROVE LIVER FUNCTION AFTER ISCHEMIA/REPERFUSION INJURY	NATL INST OF HLTH, R01 DK090115	01-Apr-2012-31-Mar-2016	69111.89
Leeuwenburgh, Christiaan	PI: MOLECULAR MECHANISMS OF OXIDATIVE STRESS IN AGING MUSCLE	NATL INST OF HLTH, R01 AG017994	01-Aug-2000-30-Jun-2013	38591.00
Leeuwenburgh, Christiaan	Co-I; PERIPHERAL ARTERIAL DISEASE IN OLDER ADULTS STUDY	NORTHWESTERN UNIV,	01-Dec-2011-31-Oct-2012	15089.00
Leeuwenburgh, Christiaan	Co-I: UNIVERSITY OF ALABAMA BIRMINGHAM CONTRACT	UNIV OF ALABAMA,	01-Dec-2011-30-Jun-2012	28556.00
Mann, William C	PI: COMPREHENSIVE SUPPORT FOR STEM STUDENTS WITH LEARNING DISABILITY (CS3LD)	NATL SCIENCE FOU, HRD-1246587	01-Feb-2013-31-Jan-2017	275679.00
Mann, William C	PI: COMPREHENSIVE SUPPORT FOR STEM STUDENTS WITH LEARNING DISABILITY (CS3LD) - PARTICIPANT SUPPORT ONLY -	NATL SCIENCE FOU, HRD-1246587	01-Feb-2013-31-Jan-2017	171000.00
Mann, William C	PI: ELDER ROAD USER INFORMATION SYSTEM	FL DEPT OF TRANSPORTATION, AQHOO	05-Oct-2011-30-Sep-2012	62692.00
Mann, William C	PI: FL TRAUMA REHAB CENTER FOR RETURNING MILITARY PERSONNEL	US DEPT OF DEFENSE, W81XWH-11-1-0454	01-Sep-2011-02-Apr-2014	832451.00
Mann, William C	PI: REHABILITATION RESEARCH CAREER DEVELOPMENT PROGRAM	UNIV OF TEXAS, 12-031	25-Sep-2007-31-Aug-2013	274830.00
Marsiske, Michael	Core Leader: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) RC4 (MARSISKE)	NATL INST OF HLTH, P30 AG028740-06	01-Jul-2006-31-Mar-2017	20479.00
Marsiske, Michael	Core Leader: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) RC4 MARSISKE	NATL INST OF HLTH, P30 AG028740-05	01-Apr-2011-31-Mar-2012	1056.16
Marsiske, Michael	PI: PHYSICAL, COGNITIVE AND MENTAL HEALTH IN SOCIAL CONTEXT	NATL INST OF HLTH, T32 AG020499	01-May-2008-30-Apr-2014	205225.00

Marsiske, Michael	Co-I: THE LIFE STUDY	NATL INST OF HLTH, U01 AG022376	01-Sep-2011-30-Nov-2015	26180740.00
Mccrae, Christina Smith	Co-PI: COGNITIVE BEHAVIORAL EFFECTS ON SLEEP, PAIN, AND CYTOKINES IN GYNECOLOGIC CANCER	NATL INST OF HLTH, R01 CA138808	01-Jun-2010-31-May-2015	68711.00
Mccrae, Christina Smith	PI: COGNITIVE-BEHAVIORAL THERAPY FOR INSOMNIA (CBTI) ROLLOUT/EVIDENCE BASED THERAPIES	US DEPT OF VETERANS AFFAIRS,	01-Jan-2012-31-May-2012	5418.00
Mccrae, Christina Smith	PI: IMPROVING DEMENTIA CAREGIVER SLEEP AND THE EFFECT ON HEART DISEASE BIOMARKERS	UNIV OF SOUTH FLORIDA, 6201-1118-00-A	15-Aug-2011-31-Jul-2013	97260.00
Mccrae, Christina Smith	Co-PI: SLEEP AND PAIN INTERVENTIONS IN FIBROMYALGIA: HYPERALGESIA AND CENTRAL SENSITIZATION	NATL INST OF HLTH, R01 AR055160	14-Apr-2008-31-Mar-2014	156730.12
Neff, Donna	PI: FOREIGN EDUCATED NURSES: EFFECTS ON NURSE, QUALITY OF CARE AND PATIENT SAFETY INDICATOR OUTCOMES	NATL CNCL STATE BOARDS OF NURS, R41009	01-Nov-2011-31-Dec-2012	26068.00
Neff, Donna	PI: HOSPITAL PATIENT OUTCOMES ASSOCIATED WITH INTERNATIONALLY EDUCATED NURSES	NATL INST OF HLTH, K01 NR011174	30-Sep-2009-31-Jul-2012	85406.00
Pahor, Marco	PI: AMPS UNRESTRICTED EDUCATIONAL GRANT	ASSO MIDI PYRENNEES SANTE,	01-Nov-2011-31-Oct-2012	27891.00
Pahor, Marco	PI: BIOMARKERS SYMPOSIUM	MULTIPLE SPONSORS,	01-Jan-2012-30-May-2012	65000.00
Pahor, Marco	PI: CLAUDE D. PEPPER OAIC SUPPLEMENT FOR LIFE BIOMARKERS TRAINING CONFERENCE FOR YOUNG INVESTIGATORS	NATL INST OF HLTH, P30 AG028740-05 S1	15-Sep-2011-31-Mar-2012	44368.00
Pahor, Marco	PI: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) LAC	NATL INST OF HLTH, P30 AG028740-05	01-Apr-2011-31-Mar-2012	12028.39
Pahor, Marco	PI: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) RC5 CL	NATL INST OF HLTH, P30 AG028740-05	01-Apr-2011-31-Mar-2012	8279.97

Pahor, Marco	PI: INTERNATIONAL CONFERENCE ON SARCOPENIA RESEARCH	UNIVERSITY OF TOULOUSE,	01-Dec-2012-31-May-2013	48534.72
Pahor, Marco	PI: OXIDATIVE DAMAGE, DISABILITY AND MORTALITY IN ELDERLY	NATL INST OF HLTH, R01 AG026556	01-Jul-2007-30-Jun-2012	9.85
Pahor, Marco	PI: REGENERON PHARMACEUTICALS, INC. CONSULTANT AGREEMENT	REGENERON PHARMACEUTICALS,	18-Oct-2012-17-Oct-2013	1636.36
Pahor, Marco	PI: TESTOSTERONE STUDY	UNIV OF PENNSYLVANIA, 556786	15-Apr-2009-30-Apr-2013	1287652.00
Pahor, Marco	PI: TESTOSTERONE STUDY - PK SUPPLEMENT	UNIV OF PENNSYLVANIA, 559234	01-Jun-2012-30-Apr-2013	17503.50
Pahor, Marco	PI: THE LIFE STUDY (SUPPLEMENT)	NATL INST OF HLTH, U01 AG022376-05A2S1	01-Jan-2010-31-Aug-2011	10211.25
Pahor, Marco	PI: UNIVERSITY HOSPITAL OF TOULOUSE	UNIV HOSPITAL OF TOULOUSE,	01-Sep-2012-31-Dec-2012	9600.00
Pahor, Marco	Co-I: WOMEN'S HEALTH INITIATIVE EXTENSION 2010-2015	WAKE FOREST UNIV, WFUHS 30305	01-Oct-2010-30-Sep-2013	31747.00
Perlstein, William Michael	Mentor: AN EXAMINATION OF ATTENTIONAL SYSTEMS FOLLOWING TRAUMATIC BRAIN INJURY FOR CHRISTOPHER SOZDA	AMER PSYCHOLOGICAL ASSO,	03-Nov-2011-02-Nov-2012	1000.00
Perlstein, William Michael	Co-I: BRAIN IMAGING AND PAIN: ANALYSIS OF PLACEBO ANALGESIA	NATL INST OF HLTH, R01 AT001424	01-Feb-2010-30-Nov-2014	384005.00
Perlstein, William Michael	Mentor: DISSOCIATING MTBI AND PTSD BRAIN ACTIVITY AT REST FOR JASON GRAVANO	NATL INST OF HLTH, F31 MH102089	16-May-2013-15-May-2015	36307.00
Perri, Michael G	Co-I: CLAUDE D. PEPPER OLDER AMERICANS INDEPENDENCE CENTER (OAIC) RC1 PERRI	NATL INST OF HLTH, P30 AG028740-05	01-Apr-2011-31-Mar-2012	409.88

Perri, Michael G	Co-I: CURBOW DEPLETED URANIUM FOLLOW-UP PROGRAM	US DEPT OF VETERANS AFFAIRS,	01-Oct-2012-30-Sep-2013	19742.00
Perri, Michael G	Co-I: EXTENSION FAMILY LIFESTYLE INTERVENTION PROJECT	NATL INST OF HLTH, R18 DK082374	01-May-2010-31-Jul-2014	11070.00
Perri, Michael G	Co-I: GROUP PHONE-BASED WEIGHT CONTROL AMONG RURAL BREAST CANCER SURVIVORS	UNIV OF KANSAS, QB855030	01-Aug-2011-31-May-2013	14099.67
Perri, Michael G	Mentor: IPA FOR DR. KAREN HEGLAND	US DEPT OF VETERANS AFFAIRS,	01-Jan-2013-31-Jul-2013	19547.73
Perri, Michael G	Mentor: IPA FOR GREGORY GRAY	US DEPT OF VETERANS AFFAIRS,	01-Dec-2011-30-Nov-2013	33507.00
Perri, Michael G	Co-I: IPA FOR SAMUEL WU	US DEPT OF VETERANS AFFAIRS,	01-Apr-2012-31-Mar-2013	15113.33
Perri, Michael G	Co-I: IPA FOR SAMUEL WU (2012-COHC)	US DEPT OF VETERANS AFFAIRS,	01-Jun-2012-31-May-2013	20985.00
Perri, Michael G	Co-I: IPA FOR SUPRAJA ANAND	US DEPT OF VETERANS AFFAIRS,	01-Jul-2012-30-Jun-2013	27887.25
Perri, Michael G	PI: RURAL LIFESTYLE INTERVENTION TREATMENT EFFECTIVENESS	NATL INST OF HLTH, R01 HL087800	01-Mar-2008-31-May-2014	865863.00
Price, Catherine	Co-I: SOUTHERN HIV ALCOHOL RESEARCH CONSORTIUM (SHARC) ADMIN AND RESEARCH SUPPORT CORE	NATL INST OF HLTH, U24 AA022002	25-Sep-2012-31-Aug-2017	2907.00
Price, Catherine	PI: WHITE MATTER AND COGNITION IN PARKINSONS DISEASE	NATL INST OF HLTH, K23 NS060660	30-Sep-2007-31-Jul-2013	114435.00
Robinson, Mike E	Co-I: CENTRAL MECHANISMS OF BODY BASED INTERVENTION FOR MUSCLESKELETAL LOW BACK PAIN	NATL INST OF HLTH, R01 AT006334	01-May-2011-30-Apr-2016	23672.00
Robinson, Mike E	Co-I: PERIPHERAL AND CENTRAL MECHANISMS OF FATIGUE AND PAIN IN PATIENTS WITH ME/CFS	NATL INST OF HLTH, R01 NR014049	26-Sep-2012-30-Jun-2017	33057.00

Tucker, Carolyn M	PI: BRONX HEALTH-SMART CHURCH PROGRAM	UF FOU, F004279	22-Aug-2012-21-Aug-2013	7080.03
Tucker, Carolyn M	PI: DEVELOPMENT OF THE AFRICAN METHODIST EPISCOPAL (AME) HEALTH-SMART CHURCH MODEL PROGRAM	UF FOU, F013635	15-Mar-2012-30-Jun-2013	72000.00
Tucker, Carolyn M	PI: FLORIDA CHW PROMOTIONAL DVD	FL DEPT OF HLTH, A6816B	03-Sep-2012-31-Oct-2012	11000.00
Tucker, Carolyn M	PI: MISCELLANEOUS DONORS	MISCELLANEOUS DONORS,	15-May-1995-04-Mar-2013	19800.00
Tucker, Carolyn M	PI: PEOPLE'S SCIENTIFIC CONFERENCE TO PROMOTE HEALTH AND ELIMINATE HEALTH DISPARITIES	NATL INST OF HLTH, R13 MD007621	26-Sep-2012-25-Sep-2013	38598.00
Tucker, Carolyn M	PI: RICHARD AND THELMA O.C. BARNEY TERM PROFESSORSHIP FOR HEALTH DISPARITIES	UF FOU, 014774	01-Jul-2009-30-Jun-2015	16081.39
Tucker, Carolyn M	Co-I: SOUTHEAST CENTER FOR RESEARCH TO REDUCE DISPARITIES IN ORAL HEALTH	NATL INST OF HLTH, U54 DE019261	19-Sep-2008-31-May-2013	15373.00

**Table 5A. Predoctoral Trainees of Participating Faculty Members
(Alphabetically by Faculty Member for the Past Ten Years)**

Faculty Member	Past / Current Trainee	Trainee Name (Where Training Occurred)	Training Period (Degree)	Prior Academic Degree Institution(s)	Prior Academic Degree(s)	Prior Academic Degree Year(s)	Title of Research Project	Current Position of Past Trainees / Source of Support of Current Trainees
Abrams, Lise	Past	White, K. (U. of Florida)	1997-2002 (PhD)	Rhodes College, U. of Florida	BA, MS	1997, 1999		Assistant Professor, Psychology, College of Charleston
Abrams, Lise	Past	Margolin, S. (U. of Florida)	2002-2007 (PhD)	Palm Beach Community College, U. of Florida	BA, MS	2002, 2005	Negation comprehension and aging: the role of inhibition and the impact of compensation during reading	Assistant Professor, Psychology, College at Brockport, State University of New York
Abrams, Lise	Past	Trunk, D. (U. of Florida)	2002-2007 (PhD)	Indiana University of Pennsylvania	BS	2002	Effect of communicative goals on telling two types of autobiographical narratives in young and older adults	Assistant Professor, Psychology, Bloomfield College
Abrams, Lise (Co-chair)	Past	Baron, J. (U. of Florida)	2003-2011 (PhD)	U. of Florida	BA	2003	Increasing empathy and treatment intentions for adults in chronic pain	Research Coordinator, Health Outcomes and Policy, University of Florida
Abrams, Lise	Current	Farrell, M. (U. of Florida)	2007-	Appalachian State	BA	2006		Pre-doctoral Fellow, University of Florida
Abrams, Lise	Current	Pelham, S. (U. of Florida)	2008-	U. of Kansas	BA, BA, MS	1996, 1999, 2000		Pre-doctoral Fellow, University of Florida
Altmann, Lori	Past	Morelli, C. (U. of Florida)	2000-2006 (PhD)	Emanuel College, U. of Rhode Island	BA, MA	1996, 1998	Choosing remediation targets for naming deficits in probable Alzheimer's disease: Does typicality matter?	Industry
Altmann, Lori (Co-chair)	Past	Wiseheart, R. (U. of Florida)	2006-2010 (PhD)	U. of Florida	BA, MA	1988, 1993	The effects of phonological representation on RAN speed across two stages of reading ability	Assistant Professor, St. John's University
Altmann, Lori	Past	Key-Delyria, S. (U. of Florida)	2006-2011 (PhD)	Rice University, U. of Texas	BA, MS	2004, 2006	Executive function and language comprehension in traumatic brain injury	Visiting Asst. Professor, Temple University
Altmann, Lori (Co-chair)	Past	Park, H. (U. of Florida)	2007-2011 (PhD)	Daegu University	BA	2000	Processing speed deficits in young adults with developmental dyslexia	
Altmann, Lori	Current	Wilson, J. (U. of Florida)	2008-	Queen's University, U. of Ulster	BA, BA	1992, 1998		Pre-doctoral Fellow, University of Florida
Altmann, Lori	Current	Hazamy, A. (U. of Florida)	2010-	Florida Atlantic University, Georgia Southern University	BA, MS	2007, 2009		Pre-doctoral Fellow, University of Florida
Anton, Steven	Current	*Dubyak, P. (U. of Florida)	2006-	Brown University	BA	2004		Graduate Student Fellow, University of Florida
Ardelt, Monika	Past	Jacobs, S. (U. of Florida)	2009-2011 (PhD)	Penn State	BA	2004	Viacom as a firearm? Progressive hip- hop lyrics, the construction of social problems, and the culture industry	Visiting Assistant Professor, Pacific Lutheran University

Faculty Member	Past / Current Trainee	Trainee Name (Where Training Occurred)	Training Period (Degree)	Prior Academic Degree Institution(s)	Prior Academic Degree(s)	Prior Academic Degree Year(s)	Title of Research Project	Current Position of Past Trainees / Source of Support of Current Trainees
Ardelt, Monika	Current	Bamba, M. (U. of Florida)	2008-	Temple; U. of Maryland	BA, MS	1992, 1996		Pre-doctoral Fellow, University of Florida
Ardelt, Monika	Current	Oh, H. (U. of Florida)	2008-	Korea University; Case Western Reserve University	BA, MS	2001, 2006		Pre-doctoral Fellow, University of Florida
Ardelt, Monika (Co-chair)	Current	Zaprir, O. (U. of Florida)	2009-	U. of Florida	BA	2003		Pre-doctoral Fellow, University of Florida
Ardelt, Monika	Current	Landes, S. (U. of Florida)	2010-	Carson-Newman College; Emory University	BA, MS	1994, 1997		Pre-doctoral Fellow, University of Florida
Ardelt, Monika	Current	Kim, I. (U. of Florida)	2010-	Yonsei University; California State University	BA, MS	2000, 2009		Pre-doctoral Fellow, University of Florida
Bauer, Russell	Past	Knauts, S. (U. of Florida)	1991-2003 (PhD)	U. of Utah	BA	1991	The impact of emotion on memory and misinformation acceptance	Professional Counselor and Clinical Psychologist, Medlin Treatment Center, Georgia
Bauer, Russell (Co-chair)	Past	Rogish, M. (U. of Florida)	1993-2002 (PhD)	U. of Florida	BA	1993		Clinical Tutor, Department of Clinical Psychology and Psychological Therapies, University of Hull, Hull, UK
Bauer, Russell	Past	*Grande, L. (U. of Florida)	1996-2002 (PhD)	U. of Massachusetts	BA	1988		Clinical Psychologist, Private Practice, Boston, MA
Bauer, Russell	Past	McDonald, C. (U. of Florida)	1997-2003 (PhD)	U. of Florida	MS	1999	Inhibition in memory and attention: the role of the frontal lobes	Assistant Adjunct Professor, Department of Psychiatry, University of California, San Diego
Bauer, Russell	Past	Demery, J. (U. of Florida)	1998-2004 (PhD)	U. of West Florida, Southern Illinois University	BA, MA	1995, 1996	Operating characteristics of executive functioning tests in traumatic brain injury	Assistant Professor, Department of Psychiatry, University of Florida
Bauer, Russell	Past	*Leritz, E. (U. of Florida)	1998-2004 (PhD)	Washington University	BA, BA	1996	Associative priming and explicit memory in aging and mild cognitive impairment	Research Neuropsychologist, Geriatric Research, Education, and Clinical Center, VA Boston Healthcare System
Bauer, Russell (Co-chair)	Past	*McCoy, K. (U. of Florida)	1997-2004 (PhD)	U. of Florida	MS	1999	Understanding the transition from normal cognitive aging to mild cognitive impairment: comparing the intraindividual variability in cognitive	Assistant Professor, Department of Neurosurgery, University of Texas Health Science Center
Bauer, Russell	Past	Frakey, L. (U. of Florida)	1999-2005 (PhD)	U. of Houston	BS	1998	Visuospatial abilities in temporal lobe epilepsy	Neuropsychologist, Private Practice, Boston, MA

Faculty Member	Past / Current Trainee	Trainee Name (Where Training Occurred)	Training Period (Degree)	Prior Academic Degree Institution(s)	Prior Academic Degree(s)	Prior Academic Degree Year(s)	Title of Research Project	Current Position of Past Trainees / Source of Support of Current Trainees
Bauer, Russell	Past	*Seignourel, P. (U. of Florida)	2002-2007 (PhD)	U. of Paris VI	PhD	1999	Thinking, feeling, and doing in depression: the effect of rumination on information-processing and physiological response	Department of Psychiatry and Behavioral Sciences, University of Houston
Bauer, Russell	Past	Chang, Y. (U. of Florida)	2003-2008 (PhD)	U. of Florida	MS	2005	Item and associative memory in normal aging and individuals with mild cognitive impairment	Assistant Professor, Department of Psychology, National Taiwan University, Taipei, Taiwan
Bauer, Russell	Past	Barker, M. (U. of Florida)	2003-2009 (PhD)	U. of South, Tennessee	BS	2000	Transitive inference in temporal lobe epilepsy	Psychologist, Houston Psychotherapies, Cypress, TX
Bauer, Russell	Past	Sachs, B. (U. of Florida)	2003-2009 (PhD)	American University (DC); Virginia Tech	BA, MS	2000, 2002	The diagnostic utility of a multi-task verbal fluency paradigm in frontal and temporal lobe epilepsy: An analysis of fluency type and qualitative performance	Assistant Professor Neurology, Virginia Commonwealth University Medical Center, Richmond, VA
Bauer, Russell	Past	Daniels, B. (U. of Florida)	2003-2011 (PhD)	U. of Central Florida	BA	2003	The neuropsychological assessment battery (NAB): a test of criterion validity within an epilepsy population	Postdoctoral Fellow, James A. Haley Veteran's Hospital, Tampa, FL
Bauer, Russell	Past	Krishnan, M. (U. of Florida)	2004-2009 (PhD)	U. of Michigan	BA, MS	1997, 1999	Depression, disease knowledge, and epilepsy: Measuring the impact on adherence	Postdoctoral Fellow, Mary Free Bed Rehabilitation Hospital, Grand Rapids, MI
Bauer, Russell	Past	King, E. (U. of Florida)	2004-2010 (PhD)	U. of Florida	BA	1998	Age differences and spatial navigation in novel virtual and real world environments	Postdoctoral Fellow, James A. Haley Veterans' Hospital, Tampa, FL
Bauer, Russell	Past	Reckess, G. (U. of Florida)	2005-2011 (PhD)	Washington University (MO); Oxford	BA, MS	1998, 1999	Temporobasal sulcal morphology: configural patterns and neurocognitive relevance in healthy adults and patients with temporal lobe epilepsy	Postdoctoral Fellow, Department of Psychiatry, Johns Hopkins Hospital, Baltimore, MD
Bauer, Russell	Current	*Beck, C. (U. of Florida)	2009-	Brigham Young University	BA	2009	Anterior temporobasal sulcal morphology in temporal lobe epilepsy: association with clinical and cognitive variables	Graduate Fellowship, University of Florida
Bauer, Russell	Current	*Kuhn, T. (U. of Florida)	2009-	U. of Florida	BA	2008	Differentiating dementia subtypes using novel neurocognitive probes	Graduate Fellowship, University of Florida
Bauer, Russell	Current	*Szeles, D. (U. of Florida)	2009-	U. of Connecticut	BS - 2007			Research Assistant Fellow, University of Florida
Bauer, Russell	Current	*Gullett, J. (U. of Florida)	2011-	U. of Florida	BA	2008	Premorbid intelligence as a protective factor in post-deployment PTSD	Pre-doctoral Fellow, VA Employee, University of Florida
Bauer, Russell	Current	*Snyder, A. (U. of Florida)	2011-	Florida Institute of Technology	BS	2007	Use of the SCAT-2 in adolescent concussion management and surveillance	Research Assistant Fellow, University of Florida

Faculty Member	Past / Current Trainee	Trainee Name (Where Training Occurred)	Training Period (Degree)	Prior Academic Degree Institution(s)	Prior Academic Degree(s)	Prior Academic Degree Year(s)	Title of Research Project	Current Position of Past Trainees / Source of Support of Current Trainees
Bluck, Susan	Past	Alea, N. (U. of Florida)	1996-2004 (PhD)	Florida Keys Community College, U. of Florida	BS	1995	I'll keep you in mind: the intimacy function of autobiographical memory in adulthood	Assistant Professor, Psychology Department, University of North Carolina, Wilmington
Bluck, Susan	Past	Baron, J. (U. of Florida)	2003-2011 (PhD)	U. of Florida	BA	2003	Increasing empathy and treatment intentions for adults in chronic pain	Research Coordinator, Institute for Child Health Policy, University of Florida
Bluck, Susan	Past	Demiray, B. (U. of Florida)	2007-2010	Koc University	BA, MS	2004, 2006	The relation of the conceptual self to autobiographical memory: A comparison of young and middle-aged adults' earliest and recent memories	Postdoctoral Research Fellow, Koc University, Istanbul
Bowers, Dawn	Past	Rogish, M. (U. of Florida)	1997-2003	U. of Florida	BS	1997	Depression & social support in epilepsy	Team Director, York National Rehabilitation Hospital, England
Bowers, Dawn	Past	Pedraza, O. (U. of Florida)	1999-2004 (PhD)	Cornell	BS	1997	Taxonomic analysis of malingering	Assistant Professor, Mayo Clinic (K23 recipient)
Bowers, Dawn	Past	Selke, G. (U. of Florida)	1999-2005 (PhD)	Washington University	BS	1997	Emotional reactivity in conduct disorder and ADHD (NRSA F31-MH63545)	Clinical Assistant Professor, Brown University
Bowers, Dawn	Past	*Miller, K. (U. of Florida)	2002-2008 (PhD)	Berkeley	BS	2001	Psychophysiology, parkinson's disease and the amygdala (NRSA F31 NS53403)	Staff Psychologist, John Muir Medical Center, San Francisco
Bowers, Dawn	Past	*Kirsch-Darrow, L. (U. of Florida)	2003-2010 (PhD)	Furman	BS	2002	Multivariate approaches to apathy, cognition in Parkinson (NRSA F31- NS059142)	Postdoctoral Fellow, Johns Hopkins University
Bowers, Dawn	Past	*Springer, U. (U. of Florida)	2003-2010 (PhD)	Harvard	BS	1999	Facial expressivity; DBS; spatial cognition in essential tremore	Postdoctoral Fellow, Northern California VAMC and Berkeley
Bowers, Dawn	Past	*Mikos, A. (U. of Florida)	2004-2010 (PhD)	Grinnell	BS	2002	Parkinson Disease computational modeling of DBS leads and cognition,	Postdoctoral Fellow, Brown University
Bowers, Dawn	Past	Ferencz, B. (U. of Maastricht & U. of Florida)	2009-2010 (MSc, MPhil)	Flagler College	BA	2008	Ecological validity of apathy in Parkinson disease	Doctoral Student, Karolinska Institute
Bowers, Dawn	Current	*Zahodne, L. (U. of Florida)	2006-	U. of Michigan	BS	2004	Depression in Parkinson Disease	R01 NS0633 T32 Aging Fellowship (2010-2012)
Bowers, Dawn	Current	*Kay, D. (U. of Florida)	2007-	Washington State University	BS	2006	Sleep, cognition and Parkinson disease	Graduate Fellowship T32-Aging Fellowship (2012-2013)
Bowers, Dawn	Current	*Dietz, J. (U. of Florida)	2008-	U. of Delaware	BS	2008	Psychophysiology, emotion, Parkinson Disease	R01 NS0633 NRSA F31 NS0733
Bowers, Dawn	Current	*Jones, J. (U. of Florida)	2010-	U. of California	BS	2010	Health comorbidities & Parkinson Disease	Graduate Fellowship, University of Florida
Buford, Tom	Past	None						

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Classen, Sherrilene	Past	Awadzi, K. (U. of Florida)	2001-2006 (PhD)	U. of Ghana	BS	1993	Socio-ecological determinants of injury among younger and older adults involved in fatal motor vehicle crashes in the United States	Coordinator, Health Services Administration, Santa Fe College, Gainesville, FL
Classen, Sherrilene	Past	Winter, S. (U. of Florida)	2004-2009 (PhD)	Slippery Rock University of Pennsylvania; Western Michigan	BA, MS	1989, 1997	Content and predictive validity of a self-report safe driving behavior measure for older adults and a proxy measure for family members or caregivers	Postdoctoral Fellow, University of Florida
Cohen, Ron	Past	Norton, L. (Brown)	1998-1999	U. of California, San Diego	PhD	1998	Dementia subtypes	Assistant Professor, MGH, Harvard University
Cohen, Ron	Past	Paul, R. (Brown)	1999-2002	U. of Oklahoma	PhD	1999	Heart disease effects on the brain	Professor, Psychology, University of Missouri , St. Louis
Cohen, Ron	Past	King, T. (Brown)	1999-2000	U. of Florida	PhD	2000	Neuroimaging emotional processing	Associate Professor, Psychology, Georgia State University
Cohen, Ron	Past	Boyle, P. (Brown)	1999-2000	U. of Massachusetts	PhD	2001	Aging and dementia	Associate Professor, Rush Medical Center, Chicago.
Cohen, Ron	Past	Sweet, L. (Brown)	1999-2000	Chicago Medical School	PhD	2001	Neuroimaging, multiple sclerosis	Associate Professor, Psychiatry, Brown Medical School
Cohen, Ron	Past	Ready, R. (Brown)	2000-2001	U. of Iowa	PhD	2001	Quality of life, aging and dementia	Associate Professor, Psychiatry, Brown Medical School
Cohen, Ron	Past	Bell, S. (Brown)	2000-2001	Hahnemann University	PhD	2001	Vascular dementia	Private Practice
Cohen, Ron	Past	Gunstad, J. (Brown)	2000-2001	Ohio University	PhD	2002	Heart disease effects on brain structure-function	Associate Professor, Psychology, Kent State University
Cohen, Ron	Past	Williams, K. (Brown)	2000-2001	U. of Arizona	PhD	2001	HCV effects on cognition	Pharmaceutical Industry
Cohen, Ron	Past	Davis, K. (Brown)	2001-2002	Drexel University	PhD	2002	Vascular dementia subtypes	University of Utah
Cohen, Ron	Past	Lange, K. (Brown)	2001-2002	U. of California, San Diego	PhD	2001	Neuropsychiatric disorders	Assistant Professor, U. of California, San Diego
Cohen, Ron	Past	Tate, D. (Brown)	2002-2003	Brigham Young University	PhD	2002	Neuroimaging, HIV	Instructor, Radiology, Brigham and Women's Hospital, Harvard University
Cohen, Ron	Past	Jefferson, A. (Brown)	2002-2003	Drexel University	PhD	2002	Heart disease effects on brain structure-function	Associate Professor, Neurology, Boston University
Cohen, Ron	Past	Brickman, A. (Brown)	2002-2003	College University of New York	PhD	2002	Aging and white matter disease	Associate Professor, Columbia University
Cohen, Ron	Past	Hoth, K. (Brown)	2004-2005	U. of Iowa	PhD	2003	Heart disease effects on brain structure-function	Assistant Professor, Psychology

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Cohen, Ron	Past	Okonkwo, O. (Brown)	2009-2010	U. of Alabama, Birmingham	PhD	2010	Alzheimer's Disease	Fellow, Johns Hopkins
Cohen, Ron	Past	Gauthier, L. (Brown)	2010-2011	U. of Alabama, Birmingham	PhD	2011	MRI Volumetrics	Assistant Professor, Ohio State University
Cohen, Ron	Current	*Zahodne, L. (Brown)	2011-2012	U. of Florida	PhD (pending)	2012	Alzheimer's Disease: MRI Volumetrics	Cohen, Ronald Ph.D., ABPP, ABCN
Dotson, Vonetta	Current	*Kirtan, J. (U. of Florida)	2010-	Brigham Young University	BS	2010		Departmental Fellowship, University of Florida
Ebner, Natalie	Past	None						
Foster, Thomas	Past	Aenlle, K. (U. of Florida)	2003-2009 (PhD)	Michigan State	BA	2001	Estrogen treatment in the hippocampus: Analysis of gene expression and cognitive function in the aging female mouse	Postdoctoral Fellow/Research Chemist, Department of Veterans Affairs, Miami, FL
Foster, Thomas	Past	Bodhinathan, K. (U. of Florida)	2005-2010 (PhD)	Anna University	BA	2005	Role of redox state in mediating age-related changes in hippocampal synaptic transmission, plasticity and neuronal excitability	Research Associate and AHA Fellow, Salk Institute for Biological Studies, La Jolla, CA
Foster, Thomas	Past	Jackson, T. (U. of Florida)	2005-2010 (PhD)	U. of Pittsburgh	BA	2005	PHLPP1 regulates hippocampal Akt survival signaling	Research Associate, Department of Critical Care Medicine, University of Pittsburgh
Foster, Thomas	Current	Lee, W. (U. of Florida)	2006-	National Taiwan Norm; U. of Iowa	BA, MS	2003, 2006		Pre-doctoral Fellow, University of Florida
Foster, Thomas	Current	Guidi, M. (U. of Florida)	2009-	Florida Atlantic University	BA	2007		Pre-doctoral Fellow, University of Florida
Foster, Thomas	Current	Han, X. (U. of Florida)	2009-	Nankai University	BA	2009		Pre-doctoral Fellow, University of Florida
Foster, Thomas	Current	Bean, L. (U. of Florida)	2010-	Lake Land College; Eastern Illinois	AA, BA	2004, 2008		Pre-doctoral Fellow, University of Florida
Gonzalez-Rothi, Leslie	Past	Knight, A. (U. of Florida)	1997-2005 (PhD)	U. of South Florida	BA	1997	Interhemispheric transfer of praxis information using probable Alzheimer disease as a model for disconnection apraxia	Operations Administrator, Mayo Clinic, Jacksonville, FL
Gonzalez-Rothi, Leslie	Past	*Fritz, S. (U. of Florida)	1999-2004 (PhD)	U. of Kentucky	BS, MPT	1990, 1997	Functional and descriptive predictors of outcomes following constraint-induced movement therapy for individuals with post-stroke hemiparesis	Assistant Professor, Department of Exercise Sciences, University of South Carolina
Gonzalez-Rothi, Leslie	Past	*Hollingsworth, A. (U. of Florida)	1999-2005 (PhD)	U. of Florida	BA	1997	Proper name retrieval in normal aging	Research Speech Pathologist, Bay Pines VA Medical Center, St. Petersburg, FL

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Gonzalez-Rothi, Leslie	Past	Saleem, A. (U. of Florida)	2000-2005 (PhD)	U. of Northern Colorado, U. of Florida	BS, MA	1998, 2000	Expiratory muscle strength training in patients with idiopathic Parkinson's Disease: effect on pulmonary, cough, and swallow functions	Researcher, Department of Audiology and Speech Pathology, Amman University
Gonzalez-Rothi, Leslie	Past	*Wierenga, C. (U. of Florida)	2001-2005 (PhD)	U. of Florida	PhD	2005	Age-related changes in word retrieval electronic resource: frontal-executive vs. temporal-semantic substrates	Assistant Professor, Department of Psychiatry, University of California San Diego; VA Medical Psychologist, VA Medical Center, San Diego
Gonzalez-Rothi, Leslie (Co-chair)	Past	*Ellis, C. (U. of Florida)	2002-2005 (PhD)	U. of Georgia	BS, MA	1990, 1992	The contribution of the basal ganglia to expressive language performance	Associate Professor, Department of Health Sciences and Research, Medical University of South Carolina
Gonzalez-Rothi, Leslie	Past	*Gaiefsky, M. (U. of Florida)	2002-2006 (PhD)	Trinity University	BS	2000	Decision making in aphasia	Neuropsychologist, Private Practice, Birmingham, AL
Gonzalez-Rothi, Leslie	Past	*Charmichael, C. (U. of Florida)	2003-2008 (PhD)	U. of Central Florida	BA, MA	2001, 2003	Effects of neuromuscular electrical stimulation intensity and bolus size on hyoid movement	Assistant Professor, Department of Communication Disorders, Our Lady of the Lake University, San Antonio, TX
Gonzalez-Rothi, Leslie	Past	*Rodriguez, A. (U. of Florida)	2004-2010 (PhD)	West Virginia University, U. of Central Florida	BS, MA	1998, 2000	Semantic-motor representations: effects on language and motor production	Post-Doctoral Fellow, School of Speech Pathology and Audiology, University of Queensland, Brisbane, Australia
Gonzalez-Rothi, Leslie	Past	*Leon, S. (U. of Florida)	2004-2010 (PhD)	U. of Florida	BA	1995	Verbal creative processing in young and older adults	Post-Doctoral Fellow, Department of Neurology, University of Florida
Hall, Allyson	Past	Thompson, K. (U. of Florida)	2002-2011 (PhD)	U. of South Florida	MS	2002	Understanding the impact of medical homes on the health care utilization and expenditures of chronically ill adults	Consultant, AmerWorld Health Organization
Hall, Allyson	Current	Elliott, K. (U. of Florida)	2006-	Wesleyan College	BA	2006		Pre-doctoral Fellow, University of Florida
Harman, Jeffery	Past	Schold, J. (U. of Florida)	2004-2007 (PhD)	Emory University; North Carolina State University	BA, MS, MS	1993, 2000	Center characteristics and kidney transplant candidate outcomes	Assistant Professor, The Cleveland Clinic
Harman, Jeffery	Past	Jamoom, E. (U. of Florida)	2005-2010 (PhD)	U. of Florida; U. of Minnesota	BA, MS	2001, 2003	Impact of mental health diagnosis and treatment on asthma-related services in Medicaid youth with asthma	Associate Svc Fellow, Health Scientist, National Center for Health Stat.
Harman, Jeffery	Past	Chisholm, L. (U. of Florida)	2005-2010 (PhD)	U. of Florida; U. of South Florida	BA, MS	2000, 2005	A multilevel approach to understanding healthcare disparities in the nursing home setting	NRSA Postdoctoral Fellow, University of North Carolina

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Harman, Jeffery	Past	Sundaram, S. (U. of Florida)	2005-2009 (PhD)	U. of Central Florida; Nova Southeastern University	BA, MS	2002, 2004	Obesity and postpartum depression: Does prenatal care utilization make a difference?	Adjunct Faculty, University of Colorado-Denver
Harman, Jeffery	Past	Pradhan, R. (U. of Florida)	2006-2010 (PhD)	Baba Raghav Das Medi	BA	2002	Quality and financial performance of private equity owned nursing homes in the state of Florida	Postdoctoral Fellow, University of Alabama at Birmingham
Harman, Jeffery	Past	Xin, H. (U. of Florida)	2006-2010 (PhD)	Fudan University; Capital University	BA, MS	1996, 2004	Does high cost-sharing in physician care reduce health care utilization and expenditures differently for people with severe disease from those without?	Researcher, Ingeniz i3 Innovus
Harman, Jeffery (Co-chair)	Current	Ewigman, N. (U. of Florida)	2008-	Knox College	BA	2006	The diagnosis and treatment of anger in outpatient medical settings	Pre-doctoral Fellow, University of Florida
Hass, Chris	Past	Stewart, K. (U. of Florida)	2001-2008 (PhD)	Mercer University, Virginia Polytechnic Institute and State University	BA, MS	1994, 2001	Side onset influence on upper extremity motor functioning in Parkinson Disease	Assistant Professor, Department of Human Movement Sciences, Old Dominion University
Hass, Chris	Past	Fournier, K. (U. of Florida)	2002-2008 (PhD)	Concordia University, U. of Windsor, Ontario	BA, MA	1999, 2002	Static and dynamic balance control in children with autism spectrum disorders	Assistant Professor, Department of Health and Kinesiology, University of Texas-Pan American
Hass, Chris	Past	Vallabhajosula, S. (U. of Florida)	2006-2010 (PhD)	Osmania University; U. of Cincinnati	BA, MS	2002, 2005	Effect of low frequency bilateral deep brain stimulation of the subthalamic nucleus on balance and gait in Parkinson Disease	Postdoctoral Fellow, University of Nebraska - Omaha
Hass, Chris	Current	Amano, S. (U. of Florida)	2008-	Kobe University; Louisiana State University	BA, BA	2001, 2006		Pre-doctoral Fellow, University of Florida
Horgas, Ann	Past	Floetke Elliott, A. (U. of Florida)	2001-2006 (PhD)	U. of Florida	BS, MS	2001, 2002	Assessing and treating chronic pain in community-dwelling older adults with dementia: a single-subject approach	Postdoctoral Fellow, Department of Ophthalmology, University of Alabama at Birmingham
Horgas, Ann	Past	Onubogu, U. (U. of Florida)	2003-2008 (PhD)	University of Ibadan; Florida A&M	BA, MS	1987, 2002	Relationships among pain, pain medication, and pain outcomes in older adults with arthritis	Assistant Professor, Florida A&M University
Horgas, Ann	Past	Grall, M. (U. of Florida)	2007-2010 (PhD)	U. of North Florida	BS	1997	Differences in pain expression in elderly hip fracture patients with and without dementia: a retrospective review of medical records	ARNP – Neurology, Private Practice, Ocala, FL
Horgas, Ann	Current	Ahn, H. (U. of Florida)	2007-	U. of Seoul	BS	1997	The effect of pain on disruptive behaviors in nursing home residents with dementia	Assistant Professor, University of Florida
Horgas, Ann	Current	Daniel, C. (U. of Florida)	2008-	Kent State; Georgetown	BA, MS	1992, 1999		Pre-doctoral Fellow, University of Florida

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Horgas, Ann	Current	Ellis, L. (U. of Florida)	2010-	U. of Florida	BS, MS	1972, 1984		Pre-doctoral Fellow, University of Florida
Horgas, Ann	Current	Glover, T. (U. of Florida)	2010-	Edison Community College, U. of Florida, U. of South Florida	BA, MA, BA	1980, 1986, 2008		Pre-doctoral Fellow, University of Florida
Leeuwenburgh, Christian	Past	Hiona, A. (U. of Florida)	2001-2007 (PhD)	Aristotelian University, Queens College	BA, MS	1997, 2000	The role of mitochondrial DNA mutations in sarcopenia: implications for the mitochondrial "vicious cycle" theory and apoptosis	Post-doctoral Fellow, Department of Radiology, Molecular Imaging Program, Stanford University
Leeuwenburgh, Christian	Past	Seo, A. (U. of Florida)	2004-2010 (PhD)	Sung Kyun Kwan University	BS	2003	Mitochondrial fusion and fission dynamics in aging	Adjunct Scientist, Eunice Kennedy Shriver National Institute of Child Health and Human Development
Leeuwenburgh, Christian	Current	Dutta, D. (U. of Florida)	2006-	Bengal College of Engineering	BT	2005		Pre-doctoral Fellow, University of Florida
Lutz, Barbara	Past	Gwin, D. (U. of Florida)	2003-2009 (PhD)	U. of Miami (FL); Jacksonville University	BA, MS	1978, 2002	The experience of caring for the hospitalized patient at end of life	Interim Nursing Program Chair, ITT Technical Institute
Lutz, Barbara	Past	Abendroth, M. (U. of Florida)	2006-2010 (PhD)	Emory; Florida State	BA, BA, MS	1983, 1997, 2005	Understanding caregivers' decision process when choosing to institutionalize a relative with Parkinson's Disease	Assistant Professor, Florida State University
Lutz, Barbara	Current	Cook, C. (U. of Florida)	2008-	U. of North Carolina	BA, BA	1990, 1996		Pre-doctoral Fellow, University of Florida
Lutz, Barbara	Current	MacGregor, T. (U. of Florida)	2008-	Jacksonville University, U. of Florida	BS, MS	1994, 1999		Pre-doctoral Fellow, University of Florida
Lutz, Barbara	Current	Stone, S. (U. of Florida)	2009-	Clemson; Jacksonville University	BA, MS	1999, 2009		Pre-doctoral Fellow, University of Florida
Lutz, Barbara	Current	Creasy, K. (U. of Florida)	2010-	U. of Florida	BA, BA	2007, 2008		Pre-doctoral Fellow, University of Florida
Manini, Todd	Current	Higgins, T. (U. of Florida)	2007-	Randolph-Macon College	BA	2007		Pre-doctoral Fellow, University of Florida
Manini, Todd	Current	Cannell, M. (U. of Florida)	2009-	U. of North Texas; U. of Louisville	BA, MS	2005, 2009		Pre-doctoral Fellow, University of Florida
Mann, William	Past	Davenport, R. (U. of Florida)	1997-2007 (PhD)	Brevard Community College, U. of Florida	AA, BS	1993, 1995	Perceived smart technology needs among elders with mobility impairments: an ethnographic approach	Assistant Professor, Occupational Therapy, Nova Southeastern University
Mann, William (Co-chair)	Past	Belchior, P. (U. of Florida)	2001-2008	Dom Bosco Catholic University, Brazil	BA, BSc	1998, 1999	Cognitive training with video games to improve driving skills and driving safety among older adults	Assistant Professor, School of Physical and Occupational Therapy, McGill University

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Mann, William	Past	Justiss, M. (U. of Florida)	2002-2005 (PhD)	U. of Pittsburgh, Duquesne University	BA, MS	1993, 2000	Development of a behind-the-wheel driving performance assessment for older adults	Assistant Professor, Department of Occupational Therapy, Indiana University School of Health & Rehabilitation Sciences
Mann, William	Past	McCarthy, D. (U. of Florida)	2002-2005 (PhD)	Florida International University, Florida Atlantic University	BS, MA	1995, 2001	Outcomes evaluation of the Assessment of Driving Related Skills (ADReS)	Assistant Professor, Department of Occupational Therapy, Florida International University
Mann, William	Past	Bendixen, R. (U. of Florida)	2002-2006 (PhD)	Santa Fe Community College, U. of Florida	BS	1997	Assessment of a telerehabilitation and a telehomecare program for chronically ill veterans	Research Assistant Professor, Department of Occupational Therapy, University of Florida
Mann, William	Past	Johnson, J. (U. of Florida)	2003-2008 (PhD)	College of St. Scholastica	BA, MS	1999, 2000	Consumer response to home monitoring: A survey of older consumers and informal care providers	Occupational Therapist, Amedisys
Mann, William	Current	Kreider, C. (U. of Florida)	2007-	U. of Florida	BA	1989		Pre-doctoral Fellow, University of Florida
Marsiske, Michael (Co-mentor with W. Mann)	Past	Belchior, P. (U. of Florida)	2001-2008	Dom Bosco Catholic University, Brazil	BA, BSc	1998, 1999	Cognitive training with video games to improve driving skills and driving safety among older adults	Assistant Professor, School of Physical and Occupational Therapy, McGill University
Marsiske, Michael	Past	*McCoy, K. (U. of Florida)	2002-2004 (PhD)	Cornell, U. of Florida	BA, MS	1987, 1999	Understanding the transition from normal cognitive aging to mild cognitive impairment: comparing the intraindividual variability in cognitive function	Internship Director, Veteran's Administration, San Antonio, TX
Marsiske, Michael (Co-mentor with W. Perlstein)	Past	Dotson, V. (U. of Florida)	2002-2006 (PhD)	St. Mary's University, U. of Florida	BA, MS	1999, 2002	Cumulative disadvantage control due to depression and aging: a double jeopardy hypothesis	Assistant Professor, Clinical and Health Psychology, University of Florida
Marsiske, Michael	Past	*Cook, S. (U. of Florida)	2002-2008 (PhD)	U. of Pittsburgh	BS	2001	Impact of distraction on simulated lane navigation in older adults with and without cognitive impairment	Clinical Assistant Professor, Psychiatry/Medical Psychology, Duke University
Marsiske, Michael	Past	*Aiken Morgan, A. (U. of Florida)	2002-2008 (PhD)	Florida A&M University	BA	2002	Effects of improved physical fitness on cognitive/psychological functioning community-dwelling	Postdoctoral Fellow, Aging/Psychology & Neuroscience Duke University
Marsiske, Michael (Co-mentor with McCrae)	Current	*Dzierzewski, J. (U. of Florida)	2006-	U. of Nevada	BA	2005	Physical activity, sleep, and cognition in older adults: Consequences, correlates and inter-relationships of within-person variations	Advanced Geriatrics Fellowship, Intern Miami Veteran's Administration Supported by: NIA T32 AG020499 NIA F31 AG034002

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Marsiske, Michael	Current	*Sisco, S. (U. of Florida)	2006-	Calvin College	BA	2004	Neighborhood influences on cognitive level and training gains in the active study	Psychology Intern, North Florida/South Georgia Veteran's Administration Supported by: NIA T32 AG020499 NIA F31 AG032802
Marsiske, Michael	Current	*Yam, A. (U. of Florida)	2008-	U. of California	BA	2003	Effects of improved physical fitness on cognitive/psychological functioning community-dwelling	Pre-doctoral Fellow, University of Florida, Supported by: T32 AG020499
Marsiske, Michael	Current	*Thomas, K. (U. of Florida)	2010-	U. of California, San Diego	BA, BS	2008	Physical activity, sleep, and cognition in older adults: Consequences, correlates and inter-relationships of within-person variations	Pre-doctoral Fellow, University of Florida, Supported by: T32 AG020499
McCrae, Christina (Co-chair)	Past	*Cross, N. (U. of Florida)	2004-2009 (PhD)	North Carolina State University, East Carolina University	BA, MA	2000, 2004	Actigraphy and sleep diaries in the assessment of sleep patterns in cardiac disease	Clinical Psychologist, VA in Greensboro, NC
McCrae, Christina	Past	Dautovich, N. (U. of Florida)	2004-2010 (PhD)	U. of Alberta	BA	2000	Goal attainment scaling to empower older adults to improve their sleeping difficulties	Assistant Professor, University of Alabama
McCrae, Christina	Past	*McNamara, J. (U. of Florida)	2006-2008 (PhD)	U. of Florida	BS	2000	Strategy use and the impact of sleep on executive functioning in children	Assistant Professor, University of Florida
McCrae, Christina (Co-mentor with Marsiske)	Current	*Dzierzewski, J. (U. of Florida)	2006-	U. of Nevada	BA	2005	Physical activity, sleep, and cognition in older adults: Consequences, correlates and inter-relationships of within-person variations	Advanced Geriatrics Fellowship, Intern at Miami Veteran's Administration
McCrae, Christina	Current	*Williams, J. (U. of Florida)	2008-	U. of North Texas	BS	2008	A novel application of a biophysical theory in the understanding of disturbed sleep before and after kidney transplantation	Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
McCrae, Christina	Current	*Roth, A. (U. of Florida)	2011-	Wake Forest	MA	2008	The impact of expectancies on cognitive behavioral treatment of insomnia in older adults	Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
McCrae, Christina	Current	*Vatthauer, K. (U. of Florida)	2011-	U. of North Texas	BS	2010	Sleep, pain, and cognition in older adults with insomnia and osteoarthritis	Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
Nayfield, Susan	Past	None						
Neff, Donna	Past	Greenblum, C. (U. of Florida)	2006-2010 (PhD)	Villanova; U. of North Florida	BA, MS	1983, 2006	Women in perimenopause and menopause: stress, coping and quality of life	Postdoctoral Fellow, Scholar, University of South Florida

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Neff, Donna	Current	Arvidson, M. (U. of Florida)	2002-	U. of Alabama, Huntsville, U. of Florida	BS, MS	1979, 2001		Pre-doctoral Fellow, University of Florida
Neff, Donna	Current	Heusinger, A. (U. of Florida)	2007-	Florida State College at Jacksonville	AA	2002		Pre-doctoral Fellow, University of Florida
Pahor, Marco	Past	None						
Perlstein, William (Co-chair)	Past	Demery, J. (U. of Florida)	2000-2004 (PhD)	Southern Illinois University	MA	1996	Operating characteristics of executive functioning tests in traumatic brain injury	Assistant Professor of Psychiatry, University of Florida
Perlstein, William	Past	Cole, M. (U. of Florida)	2000-2005 (PhD)	U. of Colorado	MA	1999	Effect of goal-setting on memory performance in young and older adults: an fMRI study	Director, VANCHCS Neuropsychology Postdoctoral Residency Program
Perlstein, William	Past	Dixit, N. (U. of Florida)	2001-2006 (PhD)	Mount Holyoke College	BS	1999	Attentional bias in patients with implantable cardioverter defibrillators: examining mechanisms of hypervigilance and anxiety	Neuropsychologist, San Francisco VA Medical Center
Perlstein, William	Past	Larson, M. (U. of Florida)	2002-2008 (PhD)	Brigham Young University	BS	2002	Cognitive control disruption in TBI	Assistant Professor, Psychology and Neuroscience, Brigham Young University
Perlstein, William	Past	Dotson, V. (U. of Florida)	2002-2006 (PhD)	St. Mary's University, Texas	BA	1999	Cumulative disadvantage in cognitive control due to aging: a double jeopardy hypothesis	Assistant Professor, Department of Clinical and Health Psychology, University of Florida
Perlstein, William	Past	Kaufman, D. (U. of Florida)	2003-2009 (PhD)	Bethel College	BA	1998	The inter[;ay of apathy, novelty and attentional processing in Parkinson's disease and healthy aging: an ERP study	Assistant Professor of Psychology, St. Louis University
Perlstein, William	Past	Kellison, I. (U. of Florida)	2004-2010 (PhD)	U. of Iowa	BA	1998	An Event-Related Potential (ERP) Study Examining Reward Processing and Mood in Parkinson's Disease and Healthy Aging	Postdoctoral Fellow, Boston Consortium for Neuropsychology, APF Benton-Meier Neuropsychology Scholarship
Perlstein, William	Current	*Sozda, C. (U. of Florida)	2007-	U. of Pittsburgh	BA	2006	Disruption of attentional processing in close head injury: an event-related potential investigation	Graduate Research Assistant, University of Florida, APA Dissertation Award
Perlstein, William	Current	*Gravano, J. (U. of Florida)	2010-	U. of California, San Diego	BA	2008	A behavioral and electrophysiological examination of attentional networks in Parkinson's disease	Departmental Assistantship, Clinical and Health Psychology, University of Florida
Perlstein, William	Current	*Hill-Jarrett, T. (U. of Florida)	2011-	U. of Pittsburgh	BS	2010	Hemispheric specialization of attention networks following traumatic brain injury	McKnight Doctoral Fellowship, University of Florida

Faculty Member	Past / Current Trainee	Trainee Name (Where Training Occurred)	Training Period (Degree)	Prior Academic Degree Institution(s)	Prior Academic Degree(s)	Prior Academic Degree Year(s)	Title of Research Project	Current Position of Past Trainees / Source of Support of Current Trainees
Perri, Michael	Past	Newton, R. (U. of Florida)	1995-2002 (PhD)	Hampton University	BA	1993		Assistant Professor of Health Psychology, Pennington Biomedical Research Center, Baton Rouge, LA
Perri, Michael	Past	Anton, S. (U. of Florida)	1997-2003 (PhD)	Florida State University, U. of Florida	BS, MS	1997, 1999	Differential predictors of adherence in exercise programs with multiple levels of intensity and frequency	Assistant Professor, Department of Clinical and Health Psychology, Department of Aging and Geriatric Research, University of Florida
Perri, Michael (Co-chair)	Past	Kanasky, W. (U. of Florida)	1998-2003 (PhD)	U. of North Carolina, Chapel Hill, U. of Florida	BA, MS	1996, 2000	Success and failure in exercise initiation and adherence	Trial Consultant, Courtroom Sciences, Inc. Chicago, IL
Perri, Michael	Past	Berlant, N. (U. of Florida)	1998-2004 (PhD)	U. of California, San Diego	BA	1993	Increasing adherence to an exercise intervention	Clinical Psychologist, Private Practice, Roseville, CA
Perri, Michael	Past	Ames, G. (U. of Florida)	2000-2005 (PhD)	U. of North Dakota, North Dakota State	BA, MS	1996, 1998	Reformulated cognitive behavioral treatment for obesity: a randomized pilot study investigating changes in expectations for treatment outcome	Assistant Professor of Psychology, Psychiatry and Psychology, Mayo Clinic, Jacksonville, FL
Perri, Michael	Past	Murawski, M. (U. of Florida)	2002-2007 (PhD)	Saint Anselm College, U. of Florida	BA, MS	2002, 2004	Problem solving and the management of obesity in women from underserved rural settings	Health Psychologist and Counselor, Commonwealth Psychology Associates, Boston, MA
Perri, Michael	Past	Rickel, K. (U. of Florida)	2003-2008 (PhD)	Duke	BA	2003	Response of African-American and caucasian women in a rural setting to a lifestyle intervention for obesity	Clinical Psychologist, Structure House LLC, Durham, NC
Perri, Michael	Past	DeBraganza, N. (U. of Florida)	2004-2010 (PhD)	U. of Florida	BS, MS	2001, 2004	Self-monitoring in the long-term management of obesity	Postdoctoral Fellow, Department of Psychiatry and Neurobehavioral Sciences, University of Virginia
Perri, Michael	Past	Milsom, V. (U. of Florida)	2004-2010 (PhD)	Yale	BA	2001	Behavioral mastery and long-term maintenance of lost weight	Postdoctoral Associate, Yale University School of Medicine
Perri, Michael	Current	Andre, R. (U. of Florida)	2005-	Howard	BA	2005	Presurgical depression and anesthetic sensitivity in women undergoing surgery for the removal of gynecological tumors	Graduate Student Fellow, University of Florida
Perri, Michael	Current	*Dubyak, P. (U. of Florida)	2006-	Brown	BA	2004		Graduate Student Fellow, University of Florida
Perri, Michael	Current	*Nackers, L. (U. of Florida)	2006-	U. of Wisconsin	BA	2004	Is a fast or slow rate of weight loss associated with greater long-term weight loss maintenance? The effects or prescribing mild or moderate calorie restriction goals	Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida

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Perri, Michael	Current	*Ross, K. (U. of Florida)	2007-	Virginia Commonwealth University	BA	2006		Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
Perri, Michael	Current	*Hoover, V. (U. of Florida)	2008-	Temple	BA	2005		Graduate Student Fellow, University of Florida
Perri, Michael	Current	*Newell, K. (U. of Florida)	2009-	Southern Methodist University; Stephen F. Austin University	BA, MA	2006, 2009		Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
Perri, Michael	Current	*Lespinasse, D. (U. of Florida)	2010-	Yale	BA	2007		McKnight Fellow, Department of Clinical and Health Psychology, University of Florida
Perri, Michael	Current	*Maurer, S. (U. of Florida)	2010-	U. of Florida	BS	2009		Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
Perri, Michael	Current	*Minski, S. (U. of Florida)	2010-	U. of Florida	BS	2010		Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
Perri, Michael	Current	Al Abduljabbar, M. (U. of Florida)	2011-	U. of Jordan, Boston University	BA, MA	2003, 2009		Pre-doctoral Fellow, Department of Clinical and Health Psychology, University of Florida
Perri, Michael	Current	Karabetian, C. (U. of Florida)	2011-	Concordia University, Boston University	BA, MA	2006, 2008		Research Assistant Fellow, Department of Clinical and Health Psychology, University of Florida
Price, Catherine	Past	*Mitchell, S (U of Florida)	2006-2011 (PhD)	California State University; U of Colorado	BA, MS	2000, 2005	Executive functioning and processing speed performance over time in nondemented individuals with Idiopathic Parkinson's Disease	Postdoctoral Fellow, New Mexico VA Health Care System
Price, Catherine	Current	*Tanner, J (U of Florida)	2007-	Brigham Young University	BA, MS	2004, 2006	Verbal memory and white matter connectivity in Idiopathic PD	Price grant (NINDS K23NS060660)
Price, Catherine	Current	*Cohen, M. (U. of Florida)	2007-	U. of Delaware	BA	2007		Pre-doctoral Fellow, Department of Clinical and Health Psychology, University of Florida
Price, Catherine	Current	*Nguyen, P (U of Florida)	2009-	De Anza College; U of California	AA, BA	2005, 2007	Tracking the dorsolateral prefrontal circuit in Parkinson's disease	NHLBI (RCI HL 100195)

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Price, Catherine	Current	*Faust, M. (U. of Florida)	2011-	Providence College	BS	2008	White matter hyperintensities, blood pressure, and executive functioning in PD	Price grant (NINDS K23NS060660)
Reilly, Jamie (Co-chair)	Past	Rodriguez, A. (U. of Florida)	2004-2010 (PhD)	U. of Central Florida; West Virginia University	BA, MS	1998, 2000	Semantic-motor representations: effects on language and motor production	Senior Research Officer, University of Queensland
Reilly, Jamie	Current	Troche, J. (U. of Florida)	2009-	U. of Florida	BA	2009		Pre-doctoral Fellow, University of Florida
Reilly, Jamie (Co-chair)	Current	Park, H. (U. of Florida)	2009-	Seoul Women's University; Yonsei University	BA, MS	2003, 2007		Pre-doctoral Fellow, University of Florida
Reilly, Jamie	Current	Hung, C. (U. of Florida)	2010-	National Cheng Kung; U. of Tennessee	BA, MS	2006, 2010		Pre-doctoral Fellow, University of Florida
Roberts, Beverly	Current	Bennett, C. (U. of Florida)	2006-	U. of West Florida, U. of South Alabama	BA, MS	1997, 2003		Pre-doctoral Fellow, University of Florida
Roberts, Beverly	Current	Burns, M. (U. of Florida)	2008-	Illinois State; U. of West Florida; U. of South Alabama; U. of West Florida	BA, MS, MS, MS	1982, 1990, 1996, 1998		Pre-doctoral Fellow, University of Florida
Roberts, Beverly	Current	Reynolds, A. (U. of Florida)	2009-	Jacksonville University	BA, MS	2006		Pre-doctoral Fellow, University of Florida
Robinson, Michael	Past	Campbell, L. (U. of Florida)	1997-2002 (PhD)	Yale	BA	1997	Predispositions toward pharmacological pain management: A policy capturing study	Assistant Professor Associate Director, Center for Health Disparities Research - East Carolina University
Robinson, Michael (Co-chair)	Past	Papas, R. (U. of Florida)	1998-2004 (PhD)	Boston University	BS	1987	Sex-related predictors of health care use for pain	Research Faculty, Brown University
Robinson, Michael	Past	Brown, J. (U. of Florida)	2001-2007 (PhD)	Wake Forest	BA, MA	1998, 2001	Patient centered outcomes for chronic spine pain: multidimensional success criteria and treatment matching	Clinical Psychologist, Connecticut VA
Robinson, Michael	Past	Jump, R. (U. of Florida)	2001-2005 (PhD)	U. of Hartford	BS, MA	1995, 2000	Psychological profiles in autoimmune disease: relationship to demographic, diagnostic, disease activity and social support measures	Faculty, Medical School of Georgia
Robinson, Michael	Past	Chung, K. (U. of Florida)	2002-2007 (PhD)	U. of California, Los Angeles	BA	2001	Effects of personal placebo response information on future placebo response	Clinical Psychologist, Kaiser Permanente, San Diego
Robinson, Michael	Past	Hirsch, A. (U. of Florida)	2002-2008 (PhD)	U. of Central Florida	BA	2002	Using virtual human technology to detect age, sex, race biases	Assistant Professor, Department of Psychology, Indiana University-Purdue University Indianapolis
Robinson, Michael	Past	Alqudah, A. (U. of Florida)	2003-2007 (PhD)	U. of Jordan	BA, MS	1997, 2000	Sex and race differences in rating others' pain, pain-related negative mood, pain coping, and recommending medical help	Assistant Professor, University of Jordan

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Robinson, Michael	Past	O'Brien, E. (U. of Florida)	2003-2008 (PhD)	Saint Joseph's University	BA, MS	2000	Sleep disturbance in chronic pain patients	Research Instructor in Psychiatry and Human Behavior, Brown University
Robinson, Michael	Past	McCulloch, R. (U. of Florida)	2004-2009 (PhD)	U. of Mississippi	BA	2004	Placebo responding: An examination of expectations for pain, desire for pain relief and somatic focus	Psychologist, San Diego, CA
Robinson, Michael	Past	Stutts, L. (U. of Florida)	2005-2010 (PhD)	Davidson College	BA	2005	Virtual human technology: Use in health care trainees to detect age, race, sex biases in pain	Clinical Psychologist, Brooks Rehabilitation Center
Robinson, Michael	Past	Nisenzon, A. (U. of Florida)	2006-2011 (PhD)	Boston University U. of Florida	BS, MS	2005,	The role of anger in screening for prognostic risk factors and subgrouping low back pain patients	Post-doctoral Fellow, University of California – San Diego
Robinson, Michael	Current	Roditi, D. (U. of Florida)	2008-	Stetson University U. of Florida	BA, MA	2008, 2010	Conditioning in placebo anagesia	Minority Fellowship
Robinson, Michael	Current	*Anderson, R. (U. of Florida)	2009-	Washington University U. of Florida	BS, MS	2008, 2011	The relationship between sleep and pain	NIH R01 AT001424
Robinson, Michael	Current	*Kisaalita, N. (U. of Florida)	2009-	U. of North Carolina	BS, MS	2007, 2010	Factors affecting placebo acceptability: deception, outcome, and disease severity.	Minority Fellowship
Robinson, Michael	Current	*Wandner, L. (U. of Florida)	2009-	Connecticut College U. of Florida	BA, MS	2007, 2008		Institutional Fellowship
Robinson, Michael	Current	*Sanderson, K. (U. of Florida)	2010-	Assumption College U. of Florida	BA, MA	2006, 2009		NIH R01 AT001424
Robinson, Michael	Current	*Letzen, J. (U. of Florida)	2011-	U. of Florida	BA	2009		McKnight Fellowship
Tucker, Carolyn	Past	Hackshaw, R. (U. of Florida)	1995-2005 (PhD)	U. of Florida	BS	1995	Relationship of multicultural interactions to healthcare providers' cultural sensitivity and cultural competence	Psychologist, Private Practice, La Jolla, CA
Tucker, Carolyn	Past	Higley, B. (U. of Florida)	1997-2006 (PhD)	Baldwin-Wallace College	BA	1997	Strengthening willpower: evaluating the effectiveness of an "adherence efficacy" intervention	Founder and Director of The Building Blocks
Tucker, Carolyn	Past	Ivery, P. (U. of Florida)	1997-2009 (PhD)	Armstrong State College	BA	1996	The moderational effects of coping strategies on the associations of stress, depression, and perceived family conflict with risky sexual behavior among adolescents living with a chronic illness	Assistant Director, Counseling Services at Georgia College
Tucker, Carolyn	Past	Wallack, C. (U. of Florida)	1998-2007 (PhD)	U. of Virginia	BA	1998	Factors associated with suicidal ideation among American college students: re-examination of the escape theory of suicide	Director, Syracuse University Counseling Center, Syracuse University

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Tucker, Carolyn	Past	Jackson, E. (U. of Florida)	1998-2008 (PhD)	Florida A&M University	BS	1998	Stress resilience in African American adolescents: the role of culture-specific protective factors	Counselor, Private Practice, Moncks Corner, SC
Tucker, Carolyn	Past	Richards, C. (U. of Florida)	2000-2005 (PhD)	Cornell University	BA	2000	A motivational approach for understanding receptivity to diversity: implications for diversity training	Clinical Psychology, Private Practice, New York, NY
Tucker, Carolyn	Past	Porter, T. (U. of Florida)	2000-2010 (PhD)	U. of Notre Dame, Miami University	BA, MS	1995, 1997	Testing Hall's Model of Christian Spirituality and Mental Health: the associations among awareness of God, born again belief, life satisfaction, and psychological distress	Clinical Therapist, County of Riverside, Riverside, CA
Tucker, Carolyn	Past	Mirsu-Paun, A. (U. of Florida)	2001-2007 (PhD)	U. of Bucharest	BA	2000	Validation of a provider self-report inventory for measuring patient-centered cultural sensitivity in health care	Licensed Psychologist, The Counseling Center, University of South Florida
Tucker, Carolyn	Past	Mack, C. (U. of Florida)	2001-2008 (PhD)	U. of Michigan, Ann Arbor	BA, MSW	1996, 1998	The association between the health-promoting behaviors of low income patients/caregivers and those of their chronically ill adolescents	Associate Professor, University of North Carolina School of Medicine
Tucker, Carolyn	Past	Ferdinand, L. (U. of Florida)	2002-2008 (PhD)	McGill University, Boston University	BS, MA	1997, 1998	Impact of pilot patient-centered culturally sensitive health care intervention on the health outcomes of racial/ethnic minority and low-income primary care patients with hypertension	Licensed Psychologist, The Counseling Center, University of South Florida
Tucker, Carolyn	Past	Van den Berg, J. (U. of Florida)	2002-2009 (PhD)	Fairleigh Dickinson University, Yale University	BA, MS	1997, 2002	Stigma, psychological distress, and health-related quality of life among persons living with HIV/AIDS in the United States	Assistant Professor, Department of Medicine, Division of Infectious Diseases, Alpert Medical School of Brown University
Tucker, Carolyn	Past	Brozyna, A. (U. of Florida)	2004-2010 (PhD)	U. of Illinois, Urbana-Champaign	BS	2003	The association of acculturation with perceived patient-centered cultural sensitivity and patient satisfaction among a national sample of ethnic and racial minorities	Psychologist, Private Practice, Tampa, FL
Tucker, Carolyn	Past	Jones, J. (U. of Florida)	2004-2010 (PhD)	U. of Florida	BS, MS	2003, 2007	A test of a patient-centered culturally sensitive health care model for understanding treatment adherence among a sample of Hispanic/Latino patients	Research Associate, Imperial College, London, England
Tucker, Carolyn	Past	Daly, K. (U. of Florida)	2006-2011 (PhD)	St. Mary's College, U. of Missouri, Columbia	BA, MA	2004, 2006	Test of a culturally sensitive health empowerment intervention on stress, health promoting behaviors, blood glucose and blood pressure among diverse adults with Type 2 diabetes from low-income households	Psychologist, Private Practice, Lenoir City, TN

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Tucker, Carolyn	Current	Bailey, T. (U. of Florida)	2003-	U. of Miami	BA, MS	1999, 2003		Pre-doctoral Fellow, University of Florida
Tucker, Carolyn	Current	Nghiem, K. (U. of Florida)	2003-	Oklahoma State University	BS	2003		Pre-doctoral Fellow, University of Florida
Tucker, Carolyn	Current	Lopez, M. (U. of Florida)	2005-	U. of Miami, U. of Florida	BA, BS	2005		Pre-doctoral Fellow, University of Florida
Tucker, Carolyn	Current	Kaye, L. (U. of Florida)	2006-	U. of Florida	BA, BS, MS	2005, 2008		Pre-doctoral Fellow, University of Florida
Tucker, Carolyn	Current	Flenar Grandoit, D. (U. of Florida)	2008-	Butler University, U. of Florida	BA, MS	2008, 2010		Pre-doctoral Fellow, University of Florida
Tucker, Carolyn	Current	Nolan, S. (U. of Florida)	2008-	Davidson College, Lynchburg College, U. of Florida	BS, MA, MS	2005, 2008, 2010		Pre-doctoral Fellow, University of Florida
Veloza, Craig	Past	*Byers, K. (U. of Florida)	2000-2004 (PhD)	Rice University, U. of Florida	BA, MS	1989, 1991	Testing the accuracy of linking healthcare data across the continuum of care	Assistant Professor, Texas Tech University, Health Science Center, Lubbock, TX
Veloza, Craig (Co-chair)	Past	Justiss, M. (U. of Florida)	2002-2005 (PhD)	U. of Pittsburgh, Duquesne University	BA, MS	1993, 1995	Development of a behind-the-wheel driving performance assessment for older adults	Assistant Professor, Department of Occupational Therapy, Indiana University School of Health & Rehabilitation Sciences
Veloza, Craig	Past	Woodbury, M. (U. of Florida)	2002-2006 (PhD)	Elizabethtown College, U. of South Carolina, Columbia	BS, MA	1986, 1995	Measuring post-stroke arm motor ability: measurement properties of the Fugl-Meyer upper extremity assessment examined with an item response theory measurement framework	Assistant Professor, Department of Health Sciences and Research, Medical University of South Carolina; Research Health Scientist, R.H. Johnson VA Medical Center, Charleston, SC
Veloza, Craig	Past	Wang, Y. (U. of Florida)	2002-2007 (PhD)	National Taiwan University	BS	1999	Linking the functional independence measure (FIM) and the Minimum Data Set (MDS)	Post-Doctoral Fellow, Sensory Motor Performance Program, Rehabilitation Institute of Chicago
Veloza, Craig	Past	Lehman, L. (U. of Florida)	2002-2008 (PhD)	U. of South Carolina, Spartanburg, U. of Florida	BS, MS	1999, 2005	Responsiveness comparison of two upper-extremity outcome measures	Faculty, University of South Carolina, Greenville, NC
Veloza, Craig	Past	Wang, J. (U. of Florida)	2003-2009 (PhD)	National Taiwan University	BA	2000	Using real-data simulations to compare computer adaptive testing and static short-form administrations of an upper extremity item bank	Assistant Professor, Shu-Zen College of Medicine and Management, Taiwan (R.O.C.)

Faculty Member	Past / Current Trainee	Trainee Name (Where Training Occurred)	Training Period (Degree)	Prior Academic Degree Institution(s)	Prior Academic Degree(s)	Prior Academic Degree Year(s)	Title of Research Project	Current Position of Past Trainees / Source of Support of Current Trainees
Veloza, Craig (Co-chair)	Past	Waid-Ebbs, K. (U. of Florida)	2003-2008 (PhD)	Eastern Michigan University	BA, MS	1983, 1991	Creating a novel measure of functional problem solving in individuals with Traumatic Brain Injury (TBI) using a Rasch analysis procedure	Health Scientist Specialist, VAMC
Veloza, Craig	Past	Romero, S. (U. of Florida)	2004-2008 (PhD)	U. of Florida	BS, MS	1996, 1998	Minimal detectable change and patient reported outcomes in falls rehabilitation	Research Assistant Professor, Department of Occupational Therapy, University of Florida; Research Health Science Specialist, Rehabilitation Outcomes Research Center, North Florida/South Georgia Veterans Health system, Gainesville, FL
Veloza, Craig	Past	Wen, P. (U. of Florida)	2004-2009 (PhD)	National Cheng-Kung University, Taiwan, U. of Florida	BS, MS	1996, 2007	Psychometric properties and rater effects of the computer adaptive measure of functional cognition for traumatic brain injury	Faculty, Santa Fe College, Gainesville, FL
Veloza, Craig	Past	Choi, B. (U. of Florida)	2001-2010 (PhD)	Yonsei University	BS, MPH	1987, 1989	Developing precise disability measures for back pain	Research Scientist, Brookdale Innovative Senior Care Inc., Gainesville, FL
Veloza, Craig	Current	*Berger, K. (U. of Florida)	2010-	Northwestern University	BA	1984	Neurobiological findings in autism relevant to motor behaviors	Pre-doctoral Fellow, University of Florida NIH U01AR057
Weber, Bryan	Current	Cunningham, C. (U. of Florida)	2008-	U. of Nebraska; Hampton University	BA, MS	1995, 2004	The role of resilience and social support in predicting post-deployment adjustment in Navy personnel	Pre-doctoral Fellow, University of Florida
West, Robin	Past	Thorn, R. (U. of Florida)	1994-2003 (PhD)	U. of Richmond, U. of Florida	BA, MS	1993, 1997		
West, Robin	Past	Semegon, A. (U. of Florida)	1998-2006 (PhD)	U. of North Florida	BA	1996	Self-defining autobiographical memory in relation to adult self-concept and psychological well-being	Clinical Research Coordinator, Gutstein Shelley and Associates
West, Robin (Co-chair)	Past	Smith, S. (U. of Florida)	2001-2003 (PhD)	Manatee Community College, U. of Florida	AA, BA, MA	1995, 1997, 1999	Acknowledgment of hearing loss by older adults	Research Audiologist and Director of Audiologic Rehabilitation Clinics, James H. Quillen VA Medical Center, Mountain Home, TN
West, Robin	Past	Dark-Freudman, A. (U. of Florida)	2004-2009 (PhD)	U. of Florida	BA, MS	1998, 2004	Possible selves and perceived competence in relation to cognition and health	Assistant Professor, University of North Carolina at Wilmington

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West, Robin (Co-chair)	Past	Bensadon, B. (U. of Florida)	2005-2010 (PhD)	Boston University	BA, MS	1996, 2001	Memory self-efficacy and stereotype effects in aging	Postdoctoral Clinical Research Fellow, Department of Geriatric Medicine, University of Oklahoma
West, Robin	Past	Hastings, E. (U. of Florida)	2006-2011 (PhD)	U. of Virginia; Marymount University; George Mason University	BA, MS, MS	2000, 2002, 2006	The achievement goal framework and learning in adulthood	Clinical Trials Research Coordinator, Center for Movement Disorders and Neurorestoration, College of Medicine, University of Florida

**Table 6A. Publications of Research Completed by Predoctoral Trainees (New Applications)
(Group Past and Current Trainees Separately, then sort by Year of Entry)**

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Abrams, L.	Past	White, K. (1997-2002)	White, K., Abrams, L., 2002, "Does priming specific syllables during tip-of-the-tongue states facilitate word retrieval in older adults?" Psych. Aging, Vol. 17, Issue 2, 226-35. Abrams, L., White, K., Eitel, S., 2003, "Isolating phonological components that increase tip-of-the-tongue resolution," Mem. Cognit., Vol. 31, Issue 8, 1153-62. White, K., Abrams, L., 2004, "Phonologically mediated priming of preexisting and new associations in young and older adults," J. Exp. Psychol. Learn Mem. Cogn., Vol. 30, Issue 3, 645-55. White, K., Abrams, L., 2004, "Free associations and dominance ratings of homophones of young and older adults," Behav. Res. Methods Instrum. Comput., Vol. 36, Issue 3, 408-20. White, K., Abrams, L., Zoller, S., Gibson, S., 2008, "Why did I right that? Factors that influence the production of homophone substitution errors," Q. J. Exp. Psychol., Vol. 67, Issue 7, 977-85. White, K., Abrams, L., Byrd, A., 2009, "Generation, intentionality of processing at encoding and retrieval, and age-related associative deficits," Memory, Vol. 17, Issue 5, 481-92. White, K., Abrams, L., McWhite, C., Hagler, H., 2010, "Syntactic constraints in the retrieval of homophone orthography," J. Exp. Psychol. Learn Mem. Cogn., Vol. 35, Issue 1, 160-9. White, K., Abrams, L., Palm, G., Protasi, M., 2012, "Age-related influences on lexical selection and orthographic encoding during homophone spelling," Vol. 27, Issue 1, 67-79.
Abrams, L.	Past	Margolin, S. (2002-2007)	Margolin, S., Abrams, L., 2007, "Individual differences in young and older adults' spelling: do good spellers age better than poor spellers?" Neuropsych. Dev. Cogn. B. Aging Neuropsych. Cogn., Vol. 14, Issue 5, 529-44. Abrams, L., Farrell, M., Margolin, S., 2010, "Older adults' detection of misspellings during reading," J. Gerontol. B. Psych. Sci. Soc. Sci., Vol. 65, Issue 6, 680-3, PMID: PMC2954326.
Abrams, L.	Past	Trunk, D. (2002-2007)	Abrams, L., Trunk, D., Merrill, L., 2007, "Why a superman cannot help a tsunami: activation of grammatical class influences resolution of young and older adults' tip-of-the-tongue states," Psychol. Aging, Vol. 22, Issue 4, 835-45. Trunk, D., Abrams, L., 2009, "Do younger and older adults' communicative goals influence off-topic speech in autobiographical narratives," Psychol. Aging, Vol. 24, Issue 2, 324-37.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMCID)
Abrams, L.	Past	Baron, J. (2003-2011)	Knapp, C.A., Hinojosa, M., Baron-Lee, J. , Fernandez-Baca D., Hinojosa R., Thompson L. (2011). Factors Associated with a Medical Home among Children with Attention-Deficit Hyperactivity Disorder. <i>Maternal and Child Health</i> . E-pub ahead of print. Bluck, S., Baron, J.M. , Ainsworth, S.A, Gesselman, A.N., Gold, K.L. (2011). Eliciting empathy for adults in chronic pain: One function of autobiographical memory-sharing. <i>Applied Cognitive Psychology</i> . E-pub ahead of print. Baron, J.M. & Bluck, S. (2011). That was a good story! Preliminary construction of the Perceived Story Quality Index. <i>Discourse Processes</i> . Ainsworth, S., Bluck, S., & Baron, J.M. (2009). Wisdom and wrinkles: Two sides of the same coin? <i>Signpost: Journal of Dementia and Mental Health Care of Older People</i> . Cardiff, UK: Cardiff and Vales NHS Trust. Baron, J.M. & Bluck, S. (2009). Autobiographical memory sharing in everyday life: Characteristics of a good story. <i>International Journal of Behavioral Development</i> , 33 (2), 105-117. Bluck, S. & Baron, J.M. (2008). Wisdom. In D. Carr, R. Crosno, M. E. Hughes, & A. Pienta (Eds.), <i>Encyclopedia of the Life Course and Human Development</i> (pp. 444-448). Farmington Hills, MI: Gale. Glück, J., Bluck, S., Baron, J.M. & McAdams, D. (2005). The wisdom of experience: Autobiographical narratives across adulthood. <i>International Journal of Behavioral Development</i> , 29, 197-208.
Abrams, L.	Current	Farrell, M. (2007-)	Abrams, L., Farrell, M. , Margolin, S., 2010, "Older adults' detection of misspellings during reading," J. Gerontol. B. Psychol. Sci. Soc. Sci., Vol. 65, Issue 6, 680-3, PMCID: PMC2954326.
Abrams, L.	Current	Pelham, S. (2008-)	Pelham, S. , 2011, "The input ambiguity hypothesis and case blindness: an account of cross-linguistic and intra-linguistic differences in case errors," J. Child Lang., Vol. 38, Issue 2, 235-72.
Altmann, L.	Past	Morelli, C. (2000-2006)	Altmann, L., Morelli, C. , 2006, "Alzheimer disease in N.J. Salkind (Ed.), <i>Encycl. of Hum. Dev.</i> , 79-81. Morelli, C. , Altmann, L., Kendall, D., Fischler, I., Heilman, K., 2011, "Effects of a semantic elaboration and typicality on picture naming in Alzheimer Disease," J. Com. Disord., Issue 44, 413-428.
Altmann, L.	Past	Wiseheart, R. (2006-2010)	Wiseheart, R. , Altmann, L., Park, H., Lombardino, L., 2009, "Sentence comprehension in young adults with developmental dyslexia," <i>Ann. Dyslexia</i> , Vol. 2, 151-67.
Altmann, L.	Past	Key-Delyria, S. (2006-2011)	No Publications
Altmann, L.	Past	Park, H. (2007-2011)	Wiseheart, R., Altmann, L., Park, H. , Lombardino, L., 2009, "Sentence comprehension in young adults with developmental dyslexia," <i>Ann. Dyslexia</i> , Vol. 2, 151-67.
Altmann, L.	Current	Wilson, J. (2008-)	No Publications
Altmann, L.	Current	Hazamy, A. (2010-)	No Publications
Anton, S.	Current	*Dubyak, P. (2006-)	Anton, S., Manini, T., Milsom, V., Dubyak, P. , Cesari, M., Cheng, J., Daniels, M., Marsiske, M., Pahor, M., Leeuwenburgh, C., Perri, M., 2011, "Effects of a weight loss plus exercise program on physical function in overweight, older women: a randomized controlled trial," <i>Clin. Interv. Aging</i> , Vol. 6, 141-9, PMCID: PMC3131984.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Ardelt, M.	Past	Jacobs, S. (2009-2011)	No Publications
Ardelt, M.	Current	Bamba, M. (2008-)	No Publications
Ardelt, M.	Current	Oh, H. (2008-)	No Publications
Ardelt, M.	Current	Zapir, O. (2009-)	No Publications
Ardelt, M.	Current	Landes, S. (2010-)	Landes, S. , 2010, "Deliberating death," J. Pastoral. Care Counsel., Vol. 64, Issue 3, 1-9.
Ardelt, M.	Current	Kim, I. (2010-)	No Publications
Bauer, R.	Past	Knauts, S. (1991-2003)	No Publications
Bauer, R.	Past	Rogish, M. (1992-2002)	Anderson, J., Gilmore, R., Roper, S., Crosson, B., Bauer, R., Nadeau, S., Beversdorf, D., Cibula, J., Rogish, M. , Kortencamp, S., Hughes, J., Gonzalez-Rothi, L., Heilman, K., 1999, "Conduction aphasia and the arcuate fasciculus: A reexamination of the Wernicke-Geschwind model," <i>Brain Lang.</i> , Vol. 70, Issue 1, 1-12. Schinka, J., Vanderploeg, R., Rogish, M. , Graves, A., Mortimer, J., Ordoric, P., 2002, "Effects of the use of alcohol and cigarettes on cognition in elderly adults," <i>J. Int. Neuropsychol. Soc.</i> , Vol. 8, Issue 6, 811-8
Bauer, R.	Past	*Grande, L. (1996-2002)	McDonald, C., Bauer, R.M., Grande, L. , Gilmore, R., Roper, S. (2001). The role of the frontal lobes in memory: evidence from unilateral frontal resections for relief of intractable epilepsy. <i>Arch. Clin. Neuropsychol.</i> , Vol 16, 571-85. McDonald, C., Bauer, R.M., Filteo, J., Grande, L. , Roper, S., Gilmore, R. (2005). Attentional inhibition in patients with focal frontal lobe lesions. <i>J. Clin. Neuropsychol.</i> , Vol. 27, Issue 4, 485-503. McDonald, C., Bauer, R., Filteo, J., Grande, L. , Roper, S., Buchanan, R., Gilmore, R. (2005). Semantic priming in patients with right frontal lobe lesions. <i>J. Int. Neuropsychol. Soc.</i> , Vol. 11, Issue 2, 132-43. Grande, L. , Crosson, B., Heilman, K.M., Bauer, R.M., Kilduff, P., McGlinchey, R.E. (2006). Visual selective attention in Parkinson's disease: dissociation of exogenous and endogenous inhibition. <i>Neuropsychology</i> , Vol. 20, 370-82. [Dissertation] Leritz, E., Grande, L. , Bauer, R.M. (2006). Temporal lobe epilepsy as a model to understand human memory: the distinction between explicit and implicit memory. <i>Epilepsy Behavior</i> , Vol 9, 1-13. McDonald, C., Bauer, R., Filteo, J., Grande, L. , Roper, S., Gilmore, R. (2006). Episodic memory in patients with focal frontal lobe lesions. <i>Cortex</i> , Vol. 42, Issue 8, 1080-92.

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Bauer, R.	Past	McDonald, C. (1997-2003)	McDonald, C., Bauer, R., Filteo, J., Grande, L., Roper, S., Gilmore, R., 2005, "Attentional inhibition in patients with focal frontal lobe lesions," J. Clin. Neuropsychol., Vol. 27, Issue 4, 485-503. McDonald, C., Bauer, R., Filteo, J., Grande, L., Roper, S., Buchanan, R., Gilmore, R., 2005, "Semantic priming in patients with right frontal lobe lesions," J. Int. Neuropsychol. Soc., Vol. 11, Issue 2, 132-43. McDonald, C., Bauer, R., Filteo, J., Grande, L., Roper, S., Gilmore, R., 2006, "Episodic memory in patients with focal frontal lobe lesions," Cortex., Vol. 42, Issue 8, 1080-92. McDonald, C., 2008, "The use of neuroimaging to study behavior in patients with epilepsy," Epilepsy Behav., Vol. 12, Issue 4, 600-11.
Bauer, R.	Past	Demery, J. (1998-2004)	Demery, J., Hanlon, R.E., Bauer, R.M. (2001). Profound amnesia and confabulation following traumatic brain injury. <i>Neurocase</i>, 7, 2965-302. Bauer, R.M., Demery, J.A. (2003). Angosia. In K.M. Heilman & E. Valenstein (Eds.) <i>Clinical Neuropsychology</i> (4th edition), pp 236-295. NY: Oxford University Press. Demery, J., Hanlon, R.E., Bauer, R.M. (2003). Amnesic-confabulatory syndrome in traumatic brain injury. <i>Dementia</i>, 3, 8-9. Demery, J., Larson, M., Dixit, N., Bauer, R.M., & Perlstein, W.M. (2010). Operating characteristics of executive functioning tests following traumatic brain injury. <i>The Clinical Neuropsychologist</i>, Vol. 24, 1292-1308.
Bauer, R.	Past	*Leritz, E. (1998-2004)	Bauer, R.M., Leritz, E., Bowers, D. (2003). Research methods in neuropsychology. In J.A. Schinka, & W.F. Velicer (Eds.) <i>Comprehensive Handbook of Psychology, Vol. 2,: Research Methods in Psychology</i>, pp. 289-322. NY: John Wiley & Sons. Leritz, E., Loftis, C., Friedman, W., Bowers, D. (2004). Self-awareness of deficits in Parkinson's disease. <i>Clin. Neuropsych.</i>, Vol. 18, 352-61. Leritz, E., Grande, L., Bauer, R.M. (2006). Temporal lobe epilepsy as a model to understand human memory: the distinction between explicit and implicit memory. <i>Epilepsy Behavior</i>, Vol 9, 1-13.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Bauer, R.	Past	*McCoy, K. (1997-2004)	Nadeau, S., McCoy, K., Crucian, G., Greer, R., Rossi, F., Bowers, D., Goodman, W., Heilman, K., Triggs, W., 2002, "Cerebral blood flow changes in depressed patients after treatment with repetitive transcranial magnetic stimulation: evidence of individual variability," Neuropsychiatry Neuropsych. Behav. Neurol., Vol. 15, Issue 3, 159-75. Jones, R., Rosenberg, A., Morris, J., Allaire, J., McCoy, K., Marsiske, M., Kleinman, K., Rebok, G., Malloy, P., 2005, "A growth curve model of learning acquisition among cognitively normal older adults," Exp. Aging Res., Vol. 31, Issue 3, 291-312, PMID: PMC2908897. McCoy, K., 2006, "Patient page. Even a minor stroke might lead to stress and anxiety," Neurology., Vol. 66, Issue 4, 15-6. Szabo, C., Knappe, K., Leland, M., Feldman, J., McCoy, K., Hubbard, G., Williams, J., 2009, "Mortality in captive baboons with seizures: a new model for SUDEP?" Epilepsia, Vol. 50, Issue 8, 1995-8, PMID: PMC2935173. Cook, S., Marsiske, M., McCoy, K., 2009, "The use of the Modified Telephone Interview for Cognitive Status (TICS-M) in the detection of amnesic mild cognitive impairment," J. Geriatr. Psych. Neurol., Vol. 22, Issue 2, 103-9, PMID: PMC2913129. Dzierzewski, J., Williams, J., Roditi, D., Marsiske, M., McCoy, K., McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMID: PMC2924958.
Bauer, R.	Past	Frakey, L. (1999-2005)	Heidgerken, A., Geffken, G., Modi, A., Frakey, L., 2005, "A survey of autism knowledge in a health care setting," J. Autism. Dev. Disord., Vol. 35, Issue 3, 323-30. Malloy, P., Tremont, G., Grace, J., Frakey, L., 2007, "The frontal systems behavior scale discriminates frontotemporal dementia from Alzheimer's disease," Alzheimer's disease, Alzheimer's Dement., Vol. 3, Issue 3, 200-3. Tremont, G., Papandonatoes, G., Springate, B., Huminski, B., McQuiggnan, M., Grace, J., Frakey, L., Ott, B., 2011, "Use of the telephone-administered Minnesota cognitive acuity screen to detect mild cognitive impairment," Am. J. Alzheimer's Dis. Other Dement., Vol. 26, Issue 7, 555-62.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Bauer, R.	Past	*Seignourel, P. (2002-2007)	Perlstein, W., Cole, M., Larson, M., Kelly, K., Seignourel, P., Keil, A. (2003). Steady-state visual evoked potentials reveal frontally-mediated working memory activity in humans, <i>Neurosci. Lett.</i>, Vol. 342, Issue 3, 191-5. Perlstein, W., Cole, M., Demery, J., Seignourel, P., Dixit, N., Larson, M., Briggs, R. (2004) "Parametric manipulation of working memory load in traumatic brain injury: behavioral and neural correlates, <i>J. Int. Neuropsychol. Soc.</i>, Vol. 10, Issue 5, 724-41. Seignourel, P., Robins, D., Larson, M., Demery, J., Cole, M., Perlstein, W. (2005) "Cognitive control in closed head injury: context maintenance dysfunction or prepotent response inhibition deficit? <i>Neuropsychol.</i>, Vol. 19, Issue 5, 578-90. Foot, K., Seignourel, P., Fernandez, H., Romrell, J., Whidden, E., Jacobson, C., Rodriguez, R., Okun, M. (2006) Dual electrode thalamic deep brain stimulation for the treatment of posttraumatic and multiple sclerosis tremor, <i>Neurosurgery</i>, Vol. 58, Issue 4, 280-5. Williams, L., Seignourel, P., Crucian, G., Okun, M., Rodriguez, R., Skidmore, F., Foster, P., Jacobson, C., Romrell, J., Bowers, D., Fernandez, H. (2007) Laterality, region, and type of motor dysfunction correlate with cognitive impairment in Parkinson's disease, <i>Mov. Disord.</i>, Vol. 22, Issue 1, 141-5. Seignourel, P., Miller, K., Kellison, I., Rodriguez, R., Fernandez, H., Bauer, R., Bowers, D., Okun, M. (2007). Abnormal affective startle modulation in individuals with psychogenic [corrected] movement disorder, <i>Mov. Disord.</i>, Vol. 22, Issue 9, 1265-71. Masuda, A., Hayes, S., Fletcher, L., Seignourel, P., Bunting, K., Herbst, S., Twohig, M., Lillis, J., (2007) Impact of acceptance and commitment therapy versus education on stigma toward people with psychological disorders, <i>Behav. Res. Ther.</i>, Vol. 45 , 2764-72. Seignourel, P., Green, C., Schmitz, J. (2008). Factor structure and diagnostic efficiency of the BDI-II in treatment-seeking substance users. <i>Drug Alcohol Depend.</i>, Vol. 93, Issue 3, 271-8.
Bauer, R.	Past	Chang, Y. (2003-2008)	Shapiro, M., Chang, Y., Munson, S., Okun, M., Fernandez, H., 2006, "Hypersexuality and paraphilia induced by selegiline in Parkinson's disease: report of 2 cases," <i>Parkinsonism Relat. Disord.</i>, Vol. 12, Issue 6, 392-5. Shapiro, M., Chang, Y., Munson, S., Jacobson, C., Rodriguez, R., Skidmore, F., Okun, M., Fernandez, H., 2007, "The four As associated with pathological Parkinson disease gamblers: anxiety, anger, age, and agonists," <i>Neuropsych. Dis. Treat.</i>, Vol. 3, Issue 1, 161-7, PMID: PMC2654528. Crosson, B., McGregor, K., Gopinath, K., Conway, T., Benjamin, M., Chang, Y., Moore, A., Raymer, A., Briggs, R., Sherod, M., Wierenga, C., White, K., 2007, "Functional MRI of language in aphasia: a review of the literature and the methodological challenges," <i>Neuropsych. Rev.</i>, Vol. 17, Issue 2, 157-77, PMID: PMC2659355. Gopinath, K., Crosson, B., McGregor, K., Peck, K., Chang, Y., Moore, A., Sherod, M., Cavanagh, C., Wabnitz, A., Wierenga, C., White, K., Cheshkov, S., Krishnamurthy, V., Briggs, R., 2009, "Selective detrending method for reducing task-correlated motion artifact during speech in event-related fMRI," <i>Hum. Brain Map.</i>, Vol. 30, Issue 4, 1105-19, PMID: PMC3010868. Parkinson, B., Raymer, A., Chang, Y., Fitzgerald, D., Crosson, B., 2009, "Lesion characteristics related to treatment improvement in object and action naming for patients with chronic aphasia," <i>Brain Lang.</i>, Vol. 110, Issue 2, 61-70, PMID: PMC3239413.
Bauer, R.	Past	Barker, M. (2003-2009)	No Publications

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Bauer, R.	Past	Sachs, B. (2003-2009)	No Publications
Bauer, R.	Past	Daniels, B. (2003-2011)	No Publications
Bauer, R.	Past	Krishnan, M. (2004-2009)	Duke, D., Krishnan, M. , Faith, M., Storch, E., 2006, "The psychometric properties of the Brief Fear of negative Evaluation Scale," J. Anxiety Disord., Vol. 6, 807-17. Storch, E., Murphy, T., Fernandez, M., Krishnan, M. , Geffken, G., Kellgren, A., Goodman, W., 2007, "Factor-analytic study of the Yale Global Tic Severity Scale," Psychiatry Res., Vol. 1, Issue 3, 231-7.
Bauer, R.	Past	King, E. (2004-2010)	No Publications
Bauer, R.	Past	Reckess, G. (2005-2011)	Reckess, G. , Zahodne, L., Fennell, E., Bowers, D., 2009, "The role of the psychologist in dystonia," In M.S. Okun (Ed.) <i>The Practical Approach to the Care of the Dystonia Patient</i> , 183-209, New York, NY, Demos Medical Publishing.
Bauer, R.	Current	*Beck, C. (2009-)	Beck, C. , Leonard, C., Reckess, C., Hermann, B., Bauer, R., 2012, "Age of onset of temporal lobe epilepsy partially mediates relationship between sulcal morphology and item associative memory," Intl. Neuropsych Soc.
Bauer, R.	Current	*Kuhn, T. (2009-)	Spring, U., Troche, J., Kuhn, T. , Crucian, H., Fernandez, H., Rodriguez, R., Okun, M., Bowers, D., 2009, "Computerized self-ordered working memory performance in nondemented Parkinson disease," Intl. Neuropsych. Soc.
Bauer, R.	Current	*Szeles, D. (2009-)	No Publications
Bauer, R.	Current	*Gullett, J. (2011-)	Fitzgerald, D., Gullett, J. , Levy, C., Crosson, B., 2011, "Delayed diagnosis of intracerebral foreign body from the Vietnam War," Military Med., Vol. 176, 228-31. Gullett, J. , Price, C., Nguyen, P., Okun, M., Bauer, R., Bowers, D., 2011, "Reliability of a Benton JOLO short form in Parkinson's disease," Intl. Neuropsych. Soc.
Bauer, R.	Current	*Snyder, A. (2011-)	No Publications
Bluck, S.	Past	Alea, N. (1996-2004)	Mills, T., Alea, N. , Cheong, J., 2004, "Differences in the indicators of depressive symptoms among a community sample of African-American and Caucasian older adults," Comm. Men. Health J., Vol. 40, Issue 4, 309-31.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Bluck, S.	Past	Baron, J. (2003-2011)	Knapp, C.A., Hinojosa, M., Baron-Lee, J., Fernandez-Baca D., Hinojosa R., Thompson L. (2011). Factors Associated with a Medical Home among Children with Attention-Deficit Hyperactivity Disorder. <i>Maternal and Child Health</i>. E-pub ahead of print. Bluck, S., Baron, J.M., Ainsworth, S.A, Gesselman, A.N., Gold, K.L. (2011). Eliciting empathy for adults in chronic pain: One function of autobiographical memory-sharing. <i>Applied Cognitive Psychology</i>. E-pub ahead of print. Baron, J.M. & Bluck, S. (2011). That was a good story! Preliminary construction of the Perceived Story Quality Index. <i>Discourse Processes</i>. Ainsworth, S., Bluck, S., & Baron, J.M. (2009). Wisdom and wrinkles: Two sides of the same coin? <i>Signpost: Journal of Dementia and Mental Health Care of Older People</i>. Cardiff, UK: Cardiff and Vales NHS Trust. Baron, J.M. & Bluck, S. (2009). Autobiographical memory sharing in everyday life: Characteristics of a good story. <i>International Journal of Behavioral Development</i>, 33 (2), 105-117. Bluck, S. & Baron, J.M. (2008). Wisdom. In D. Carr, R. Crosno, M. E. Hughes, & A. Pienta (Eds.), <i>Encyclopedia of the Life Course and Human Development</i> (pp. 444-448). Farmington Hills, MI: Gale. Glück, J., Bluck, S., Baron, J.M. & McAdams, D. (2005). The wisdom of experience: Autobiographical narratives across adulthood. <i>International Journal of Behavioral Development</i>, 29, 197-208.
Bluck, S.	Past	Demiray, B. (2007-2010)	Demiray, B. , Bluck, S., 2011, "The relation of the conceptual self to recent and distant autobiographical memories," <i>Memory</i> , Vol. 19, Issue 8, 975-92.
Bowers, D.	Past	Rogish, M. (1997-2003)	Anderson, J., Gilmore, R., Roper, S., Crosson, B., Bauer, R., Nadeau, S., Beversdorf, D., Cibula, J., Rogish, M., Kortencamp, S., Hughes, J., Gonzalez-Rothi, L., Heilman, K., 1999, "Conduction aphasia and the arcuate fasciculus: A reexamination of the Wernicke-Geschwind model," <i>Brain Lang.</i>, Vol. 70, Issue 1, 1-12. Schinka, J., Vanderploeg, R., Rogish, M., Graves, A., Mortimer, J., Ordoric, P., 2002, "Effects of the use of alcohol and cigarettes on cognition in elderly adults," <i>J. Int. Neuropsychol. Soc.</i>, Vol. 8, Issue 6, 811-8.
Bowers, D.	Past	Pedraza, O. (1999-2004)	Demery, J., Pedraza, O., Hanlon, R., 2002, "Differential profiles of verbal learning in traumatic brain injury," <i>J. Clin. Exp. Neuropsychol.</i>, Vol. 24, Issue 6, 818-27. Pedraza, O., Bowers, D., Gilmore, R., 2004, "Asymmetry of the hippocampus and amygdale in MRI volumetric measurements of normal adults," <i>J. Int. Neuropsychol. Soc.</i>, Vol. 10, Issue 5, 664-78. Pedraza, O., Lucas, J., Smith, G., Willis, F., Graff-Radford, N., Ferman, T., Petersen, R., Bowers, D., Ivnik, R., 2005, "Mayo's older African American normative studies: confirmatory factor analysis of a core battery," <i>J. Int. Neuropsychol. Soc.</i>, Vol. 11, Issue 2, 184-91. Bowers, D., Miller, K., Bosch, W., Gokcay, D., Pedraza, O., Springer, U., Okun, M., 2006, "Faces of emotion in Parkinsons disease: micro-expressivity and bradykinesia during voluntary facial expressions," <i>J. Int Neuropsychol. Soc.</i>, Vol. 12, Issue 6, 765-73.
Bowers, D.	Past	Selke, G. (1999-2005)	No Publications

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Bowers, D.	Past	*Miller, K. (2002-2008)	Bowers, D., Miller, K., Bosch, W., Gokcay, D., Pedraza, O., Springer, U., Okun, M., 2006, "Faces of emotion in Parkinson's disease: micro-expressivity and bradykinesia during voluntary facial expressions," J. Int Neuropsychol. Soc., Vol. 12, Issue 6, 765-73. Bowers, D., Miller, K., Mikos, A., Kirsch-Darrow, L., Springer, U., Fernandez, H., Foote, K., Okun, M., 2006, "Startling facts about emotion in Parkinson's disease: blunted reactivity to aversive stimuli," Brain., Vol. 129, 3356-65. Miller, K., Okun, M., Fernandez, H., Jacobson, C., Rodriguez, R., Bowers, D., 2007, "Depression symptoms in movement disorders: comparing Parkinson's disease, dystonia, and essential tremor," Mov. Disord., Vol. 22, Issue 5, 666-72. Okun, M., Rodriguez, R., Mikos, A., Miller, K., Kellison, I., Kirsch-Darrow, L., Wint, D., Springer, U., Fernandez, H., Foote, K., Crucian, G., Bowers, D., 2007, "Deep brain stimulation and the role of the neuropsychologist," Clin. Neuropsychol., Vol. 21, Issue 1, 162-89. Seignourel, P., Miller, K., Kellison, I., Rodriguez, R., Fernandez, H., Bauer, R., Bowers, D., Okun, M., 2007, "Abnormal affective startle modulation in individuals with psychogenic [corrected] movement disorder," Mov. Disord., Vol. 22, Issue 9, 1265-71. Miller, K., Finney, G., Meador, K., Loring, D., 2010, "Auditory responsive naming versus visual confrontation naming in dementia," Clin. Neuropsychol., Vol. 24, Issue 1, 103-18.

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Bowers, D.	Past	*Kirsch-Darrow, L. (2003-2010)	Bowers, D., Miller, K., Mikos, A., Kirsch-Darrow, L., Springer, U., Fernandez, H., Foote, K., Okun, M., 2006, "Startling facts about emotion in Parkinson's disease: blunted reactivity to aversive stimuli," <i>Brain.</i>, Vol. 129, 3356-65. Okun, M., Rodriguez, R., Mikos, A., Miller, K., Kellison, I., Kirsch-Darrow, L., Wint, D., Springer, U., Fernandez, H., Foote, K., Crucian, G., Bowers, D., 2007, "Deep brain stimulation and the role of the neuropsychologist," <i>Clin. Neuropsychol.</i>, Vol. 21, Issue 1, 162-89. Kirsch-Darrow, L., Mikos, A., Bowers, D., 2008, "Does deep brain stimulation induce apathy in Parkinson's disease?" <i>Front Biosci.</i>, Vol. 13, Issue 13, 5316-22. Siddiqui, M., Fernandez, H., Garvan, C., Kirsch-Darrow, L., Bowers, D., Rodriguez, R., Jacobson, C., Rosado, C., Vaidyanathan, S., Foote, K., Okun, M., 2009, "Inappropriate crying and laughing in Parkinson disease and movement disorders," <i>World J. Biol. Psychiatry</i>, Vol. 10, Issue 3, 234-40. Zahodne, L., Okun, M., Foote, K., Fernandez, H., Rodriguez, R., Kirsch-Darrow, L., Bowers, D., 2009, "Cognitive declines one year after unilateral deep brain stimulation surgery in Parkinson's disease: a controlled study using reliable change," <i>Clin. Neuropsychol.</i>, Vol. 23, Issue 3, 385-405, PMID: PMC3045862. Zahodne, L., Young, S., Kirsch-Darrow, L., Nisenzon, A., Fernandez, H., Okun, M., Bowers, D., 2009, "Examination of the Lille Apathy Rating Scale in Parkinson disease," <i>Mov. Disord.</i>, Vol. 24, Issue 5, 677-83, PMID: PMC3045860. Kirsch-Darrow, L., Zahodne, L., Hass, C., Mikos, A., Okun, M., Fernandez, H., Bowers, D., 2009, "How cautious should we be when assessing pathy with the Unified Parkinson's Disease Rating Scale?" <i>Mov. Disord.</i>, Vol. 24, Issue 5, 684-8, PMID: PMC3045863. Okun, M., Fernandez, H., Wu, S., Kirsch-Darrow, L., Bowers, D., Bova, F., Suelter, M., Jacobson, C., Wang, X., Gordon, C., Zeilman, P., Romrell, J., Martin, P., Ward, H., Rodriguez, R., Roote, K., 2009, "Cognition and mood in Parkinson's disease in subthalamic nucleus versus globus pallidus interna deep brain stimulation: the COMPARE trial," <i>Ann. Neurol.</i>, Vol. 65, Issue 5, 586-95. Zahodne, L., Okun, M., Foote, K., Fernandez, H., Rodriguez, R., Wu, S., Kirsch-Darrow, L., Jacobson, C., Rosado, C., Bowers, D., 2009, "Greater improvement in quality of life following unilateral deep brain stimulation surgery in the globus pallidus as compared to the subthalamic nucleus," <i>J. Neurol.</i>, Vol. 256, Issue 8, 1321-9, PMID: PMC3045861. Kirsch-Darrow, L., Marsiske, M., Okun, M., Bauer, R., Bowers, D., 2011, "Apathy and depression: separate factors in Parkinson's disease," <i>J. Int. Neuropsychol. Soc.</i>, Vol. 17, Issue 6, 1058-66.

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Bowers, D.	Past	*Springer, U. (2003-2010)	Okun, M., Bowers, D., Springer, U., Shapira, N., Malone, D., Rezai, A., Nuttin, B., Heilman, K., Morecraft, R., Rasmussen, S., Greenberg, B., Foote, K., Goodman, W., 2004, "What's in a "smile?" Intra-operative observations of contralateral smiles induced by deep brain stimulation," <i>Neurocase</i>, Vol. 10, Issue 4, 271-9. Triggs, W., Ghacibeh, G., Springer, U., Bowers, D., 2005, "Lateralized asymmetry of facial motor evoked potentials," <i>Neurology</i>, Vol. 65, Issue 4, 541-4. Springer, U., Bowers, D., Goodman, W., Shapira, N., Foote, K., Okun, M., 2006, "Long-term habituation of the smile response with deep brain stimulation," <i>Neurocase</i>, Vol. 12, Issue 3, 191-6. Okun, M., Mann, G., Foote, K., Shapira, N., Bowers, D., Springer, U., Knight, W., Martin, P., Goodman, W., 2007, "Deep brain stimulation in the internal capsule and nucleus accumbens region: responses observed during active and sham programming," <i>J. Neurol Neurosurg. Psychiatry</i>, Vol. 78, Issue 3, 310-4, PMID: PMC2117652. Bowers, D., Miller, K., Bosch, W., Gokcay, D., Pedraza, O., Springer, U., Okun, M., 2006, "Faces of emotion in Parkinsons disease: micro-expressivity and bradykinesia during voluntary facial expressions," <i>J. Int Neuropsychol. Soc.</i>, Vol. 12, Issue 6, 765-73. Bowers, D., Miller, K., Mikos, A., Kirsch-Darrow, L., Springer, U., Fernandez, H., Foote, K., Okun, M., 2006, "Startling facts about emotion in Parkinson's disease: blunted reactivity to aversive stimuli," <i>Brain.</i>, Vol. 129, 3356-65. Okun, M., Rodriguez, R., Mikos, A., Miller, K., Kellison, I., Kirsch-Darrow, L., Wint, D., Springer, U., Fernandez, H., Foote, K., Crucian, G., Bowers, D., 2007, "Deep brain stimulation and the role of the neuropsychologist," <i>Clin. Neuropsychol.</i>, Vol. 21, Issue 1, 162-89. Springer, U., Rosas, A., McGetrick, J., Bowers, D., 2007, "Differences in startle reactivity during the perception of angry and fearful faces," <i>Emotion</i>, Vol. 7, Issue 3, 516-25. Mikos, A., Springer, U., Nisenzon, A., Kellison, I., Fernandez, H., Okun, M., Bowers, D., 2009, "Awareness of expressivity deficits in non-demented Parkinson disease," <i>Clin. Neuropsychol.</i>, Vol. 23, Issue 5, 805-17.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Bowers, D.	Past	*Mikos, A. (2004-2010)	Bowers, D., Miller, K., Mikos, A., Kirsch-Darrow, L., Springer, U., Fernandez, H., Foote, K., Okun, M., 2006, "Startling facts about emotion in Parkinson's disease: blunted reactivity to aversive stimuli," Brain., Vol. 129, 3356-65. Okun, M., Rodriguez, R., Mikos, A., Miller, K., Kellison, I., Kirsch-Darrow, L., Wint, D., Springer, U., Fernandez, H., Foote, K., Crucian, G., Bowers, D., 2007, "Deep brain stimulation and the role of the neuropsychologist," Clin. Neuropsychol., Vol. 21, Issue 1, 162-89. Mikos, A., McDowell, B., Moser, D., Bayless, J., Bowers, W., Andersen, A., Paulsen, J., 2008, "Stability of neuropsychological performance in anorexia nervosa," Ann. Clin Psychiatry, Vol. 20, Issue 1, 9-13. Kirsch-Darrow, L., Mikos, A., Bowers, D., 2008, "Does deep brain stimulation induce apathy in Parkinson's disease?" Front Biosci., Vol. 13, Issue 13, 5316-22. Mikos, A., Springer, U., Nisenzon, A., Kellison, I., Fernandez, H., Okun, M., Bowers, D., 2009, "Awareness of expressivity deficits in non-demented Parkinson disease, " Clin. Neuropsychol., Vol. 23, Issue 5, 805-17. Kirsch-Darrow, L., Zahodne, L., Hass, C., Mikos, A., Okun, M., Fernandez, H., Bowers, D., 2009, "How cautious should we be when assessing pathy with the Unified Parkinson's Disease Rating Scale?" Mov. Disord., Vol. 24, Issue 5, 684-8. Won, M., Mikos, A., Hurd, M., Fernandez, H., Eskin, T., Romrell, J., Okun, M., 2008, "Tardive parkinsonism in a bipolar patient: post-mortem examination supports a physiological rather than pathological dysfunction," Neurocase, Vol. 15, Issue 1, 66-9. Mikos, A., Zahodne, L., Okun, M., Foote, K., Bowers, D., 2010, "Cognitive declines after unilateral deep brain stimulation surgery in Parkinson's disease: a controlled study using Reliable Change, part II," Clin. Neuropsychol., Vol. 24, Issue 2, 235-45. PMID: PMC3045858. Mikos, A., Pavon, J., Bowers, D., Foote, K., Resnick, A., Fernandez, H., Thomas, P., Garvan, C., Roy, A., Okun, M., 2010, "Factors related to extended hospital stays following deep brain stimulation for Parkinson's disease," Parkinsonism Relat. Disord., Vol. 16, Issue 5, 324-8.
Bowers, D.	Past	Ferencz, B. (2009-2010)	No Publications

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Bowers, D.	Current	*Zahodne, L. (2006-)	Zahodne, L., Fernandez, H., 2008, "Course, prognosis, and management of psychosis in Parkinson's disease: are current treatments really effective?" <i>CNS Spectr.</i>, Vol. 13, Issue 3, 26-33, PMID: PMC3045851. Zahodne, L., Fernandez, H., 2008, "Pathophysiology and treatment of psychosis in Parkinson's disease: a review," <i>Drugs Aging</i>, Vol. 25, Issue 8, 665-82, PMID: PMC3045853. Zahodne, L., Okun, M., Foote, K., Fernandez, H., Rodriguez, R., Kirsch-Darrow, L., Bowers, D., 2009, "Cognitive declines one year after unilateral deep brain stimulation surgery in Parkinson's disease: a controlled study using reliable change," <i>Clin. Neuropsychol.</i>, Vol. 23, Issue 3, 385-405, PMID: PMC3045862. Zahodne, L., Young, S., Kirsch-Darrow, L., Nisenzon, A., Fernandez, H., Okun, M., Bowers, D., 2009, "Examination of the Lille Apathy Rating Scale in Parkinson disease," <i>Mov. Disord.</i>, Vol. 24, Issue 5, 677-83, PMID: PMC3045860. Kirsch-Darrow, L., Zahodne, L., Hass, C., Mikos, A., Okun, M., Fernandez, H., Bowers, D., 2009, "How cautious should we be when assessing pathy with the Unified Parkinson's Disease Rating Scale?" <i>Mov. Disord.</i>, Vol. 24, Issue 5, 684-8, PMID: PMC3045863. Zahodne, L., Okun, M., Foote, K., Fernandez, H., Rodriguez, R., Wu, S., Kirsch-Darrow, L., Jacobson, C., Rosado, C., Bowers, D., 2009, "Greater improvement in quality of life following unilateral deep brain stimulation surgery in the globus pallidus as compared to the subthalamic nucleus," <i>J. Neurol.</i>, Vol. 256, Issue 8, 1321-9, PMID: PMC3045861. Zahodne, L., Fernandez, H., 2010, "Parkinson's psychosis," <i>Curr. Treat. Options. Neurol.</i>, Vol. 12, Issue 3, 200-11, PMID: PMC3045857. Zahodne, L., Susatia, F., Bowers, D., Ong, T., Jacobson, S., Okun, M., Rodriguez, R., Malaty, I., Foote, K., Fernandez, H., 2011, "Binge eating in Parkinson's disease: prevalence, correlates and the contribution of deep brain stimulation," <i>J. Neuropsychiatry Clin. Neurosci.</i>, Vol. 23, Issue 1, 56-62, PMID: PMC3075093. Zahodne, L., Bowers, D., Price, C., Bauer, R., Nisenzon, A., Foote, K., Okun, M., 2011, "The case for testing memory with both stories and word lists prior to dbs surgery for Parkinson's Disease," <i>Clin. Neuropsychol.</i>, Vol. 25, Issue 3, 348-58, PMID: PMC3077807. Zahodne, L., Glymour, M., Sparks, C., Bontempo, D., Dixon, R., MacDonald, S., Manly, J., 2011, "Education does not slow cognitive decline with aging: 12-year evidence from the Victoria longitudinal study," <i>J. Int. Neuropsychol Soc.</i>, Vol. 17, Issue 6, 1039-46, PMID: PMC3285821. Zahodne, L., Marsiske, M., Okun, M., Rodriguez, R., Malaty, I., Bowers, D., 2012, "Mood and motor trajectories in Parkinson's disease: Multivariate latent growth curve modeling," <i>Neuropsychology</i>, Vol. 26, Issue 1, 71-80.
Bowers, D.	Current	*Kay, D. (2007-)	Kay, D. , Marsiske, M., Suomi, S., Higley, J., 2010, "Exploratory factor analysis of human infant temperament in the rhesus monkey," <i>Infant Behav. Dev.</i> , Vol. 33, Issue 1, 111-4, PMID: PMC2858223.
Bowers, D.	Current	*Dietz, J. (2008-)	No Publications
Bowers, D.	Current	*Jones, J. (2010-)	Oyama, G., Rodriguez, R., Jones, J. , Swartz, C., Merritt, S., Unger, R., Hubmann, M., Delgado, A., Simon, E., Doniger, G., Bowers, D., Foote, K., Fernandez, H., Okun, M., 2012, "Selection of Deep Brain Stimulation Candidates in Private Neurology Practices: Referral May be Simpler than a Computerized Triage System," <i>Neuromodulation</i> .
Buford, T.	Past	None	

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Classen, S.	Past	Awadzi, K. (2001-2006)	Classen, S., Lopez, E., Winter, S., Awadzi, K., Ferree, N., Garvan, C., 2007, "Population-based health promotion perspective for older driver safety: conceptual framework to intervention plan," Clin. Interv. Aging, Vol. 2, Issue 4, 677-93, PMID: PMC2686324. Classen, S., Winter, S., Awadzi, K., Garvan, C., Lopez, E., Sundaram, S., 2008, "Psychometric testing of SPIDER: data capture tool for systematic literature reviews," Am. J. Occup. Ther., Vol. 62, Issue 3, 335-48. Classen, S., Awadzi, K., Mkanta, W., 2008, "Person-vehicle-environment interactions predicting crash-related injury among older drivers," Am. J. Occup. Ther., Vol. 62, Issue 5, 580-7. Classen, S., Horgas, A., Awadzi, K., Messinger-Rapport, B., Shechtman, O., Joo, Y., 2008, "Clinical predictors of older driver performance on a standardized road test," Traffic Inj. Prev., Vol. 9, Issue 5, 456-62. Awadzi, K., Classen, S., Hall, A., Duncan, R., Garvan, C., 2008, "Predictors of injury among younger and older adults in fatal motor vehicle crashes," Accid. Anal. Prev., Vol. 40, Issue 6, 1804-10. Shechtman, O., Classen, S., Awadzi, K., Mann, W., 2009, "Comparison of driving errors between on-the-road and simulated driving assessment: a validation study," Traffic Inj. Prev., Vol. 10, Issue 4, 379-85. Classen, S., Shechtman, O., Awadzi, K., Joo, Y., Lanford, D., 2010, "Traffic violations versus driving errors of older adults: informing clinical practice," Am. J. Occup. Ther., Vol. 64, Issue 2, 233-41. Shechtman, O., Awadzi, K., Classen, S., Lanford, D., Joo, Y., 2010, "Validity and critical driving errors of on-road assessment for older adults," Am. J. Occup. Ther., Vol. 64, Issue 2, 242-51.
Classen, S.	Past	Winter, S. (2004-2009)	Classen, S., Winter, S., Velozo, C., Bedard, M., Lanford, D., Brumback, B., Lutz, B., 2010, "Item development and validity testing for a self- and proxy report: the safe driving behavior measure," Am. J. Occup. Ther. Vol. 64, Issue 2, 296-305, PMID: PMC2921635. Winter, S., Classen, S., Bedard, M., Lutz, B., Velozo, C., Lanford, D., Brumback, B., 2011, "Focus group findings for the self-report safe driving behavior measure," Can. J. Occup. Ther., Vol. 78, Issue 2, 72-9. Classen, S., Crizzle, A., Winter, S., Silver, W., Eisenschenk, S., 2012, "Evidence-based review on epilepsy and driving," Epilepsy Behav., Vol. 23, Issue 2, 103-12. Crizzle, A., Classen, S., Winter, S., Silver, W., Lafranca, C., Eisenschenk, S., 2012, "Associations between clinical tests and simulated driving performance in persons with epilepsy," Epilepsy Behav., Vol. 23, Issue 3, 241-6. Classen, S., Wen, P., Velozo, C., Bedard, M., Winter, S., Brumback, B., Lanford, D., 2012, "Rater reliability and rater effects of the Safe Driving Behavior Measure," Am. J. Occup. Ther. Vol. 66, Issue 1, 69-77. Classen, S., Wen, P., Velozo, C., Bedard, M., Winter, S., Brumback, B., Lanford, D., 2012, "Psychometrics of the self-report safe driving behavior measure for older adults," Am. J. Occup. Ther., Vol. 66, Issue 2, 233-41.
Cohen, R.	Past	Norton, L. (1998-1999)	No Publications

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Cohen, R.	Past	Paul, R. (1999-2002)	Gunstad, J., Paul, R., Cohen, R., Tate, D., Gordon, E., 2006, "Obesity is associated with memory deficits in young and middle-aged adults," <i>Eat Weight Disord.</i>, Vol. 11, Issue 1, 15-9. Gunstad, J., Paul, R., Brickman, A., Cohen, R., Arns, M., Roe, D., Lawrence, J., Gordon, E., 2006, "Patterns of cognitive performance in middle-aged and older-adults: a cluster analytic examination," <i>J. Geriatr. Psych. Neurol.</i>, Vol. 19, Issue 2, 59-64. Gunstad, J., Schfield, P., Paul, R., Sptznagel, M., cohen, R., Williams, L., Kohn, M., Gordon, E., 2006, "BDNF Val66Met polymorphism is associated with body mass index in healthy adults," <i>Neuropsychobio.</i>, Vol. 53, Issue 3, 153-6. Gunstad, J., Paul, R., Spitznagel, M., cohen, R., Williams, L., Kohn, M., Gordon, E., 2006, "Exposure to early life trauma is associated with adult obesity," <i>Psych. Res.</i>, Vol. 142, Issue 1, 31-7. Gunstad, J., Bausserman, L., Paul, R., Tate, D., Hoth, K., Poppas, A., Jefferson, A., Cohen, R., 2006, "C-reactive protein, but not homocysteine, is related to cognitive dysfunction in older adults with cardiovascular disease," <i>J. Clin. Neurosci.</i>, Vol. 13, Issue 5, 540-6. Gunstad, J., Cohen, R., Paul, R., Gordon, E., 2006, "Dissociation of the component processes of attention in healthy adults," <i>Arch. Clin. Neuropsychol.</i> Gunstad, J., Poppas, A., Smeal, S., Paul, R., Tate, D., Jefferson, A., Forman, D., Cohen, R., 2006, "Relation of brain natriuretic peptide levels to cognitive dysfunction in adults > 55 years of age with cardiovascular disease," <i>Am. J. Cardiol.</i>, Vol. 98, Issue 4, 538-40.
Cohen, R.	Past	King, T. (1999-2000)	No Publications
Cohen, R.	Past	Boyle, P. (1999-2000)	Boyle, P., Cohen, R., Paul, R., Moser, D., Gordon, N., 2002, "Cognitive and motor impairments predict functional decline in patients with vascular dementia," <i>Intl. J. Geriatr. Psych.</i>, Vol. 17, Issue 2, 164-9. Boyle, P., Malloy, P., Salloway, S., Chan-Weiner, D., Cohen, R., Cummings, J., 2003, "Executive dysfunction and apathy predict functional impairment in Alzheimer disease," <i>Am. J. Geriatr. Psych.</i>, Vol 11, Issue 2, 214-21. Boyle, P., Paul, R., Moser, D., Zawacki, T., Gordon, N., Choen, R., 2003, "Cognitive and neurologic predictors of functional impairment in vascular dementia," <i>Am. J. Geriatr. Psych.</i>, Vol. 11, Issue 1, 103-6. Boyle, P., Paul, R., Moser, D., Cohen, R., 2004, "Executive impairments predict functional delinques in vascular dementia," <i>Clin. Neuropsychol.</i>, Vol. 18, Issue 1, 75-82. Jefferson, A., Cahn-Weiner, D., Boyle, P., Paul, R., Moser, D., Gordon, N., Cohen, R., 2006, "Cognitive predictors of functional decline in vascular dementia," <i>Intl. J. Geriatr. Psych.</i>, Vol. 21, Issue 8, 752-4.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Cohen, R.	Past	Sweet, L. (1999-2000)	Sweet, L., Rao, S., Primeau, M., Mayer, A., Cohen, R., 2004, "Functional magnetic resonance imaging of working memory among multiple sclerosis patients," J. Neuroimaging, Vol. 14, Issue 2, 150-7. Sweet, L., Paskavitz, J., O'Connor, M., Browndyke, J., Wellen, J., Cohen, R., 2005, "fMRI correlates of the WAIS-III symbol search subtest," J. Intl. Neuropsych. Soc., Vol. 11, Issue 4, 471-6. Sweet, L., Rao, S., Primeau, M., Durgerian, S., Cohen, R., 2006, "Functional magnetic resonance imaging response to increased verbal working memory demands among patients with multiple sclerosis," Hum. Brain Mapp., Vol. 27, Issue 1, 28-36. Cohen, R., Grieve, S., Hoth, K., Paul, R., Sweet, L., Tate, D., Gunstad, J., Stroud, L., McCaffery, J., Hitsman, B., Niaura, R., Clark, R., MacFarlane, A., Bryant, R., Gordon, E., Williams, L., 2006, "Early life stress and morphometry of the adult anterior cingulate cortex and caudate nuclei," Bio. Psych., Vol. 59, Issue 10, 975-82. Cohen, R., Paul, R., Stroud, L., Gunstad, J., Hitsman, B., McCaffery, J., Sweet, L., Niaura, R., MacFarlane, A., Bryant, R., Gordon, E., 2006, "Early life stress and adult emotional experience: an international perspective," Intl. J. Psych. Med., Vol. 36, Issue 1, 35-52.
Cohen, R.	Past	Ready, R. (2000-2001)	No Publications
Cohen, R.	Past	Bell, S. (2000-2001)	Paul, R., Cohen, R., Moser, D., Ott, B., Zawacki, T., Gordon, N., Bell, S., Stone, W., 2001, "Performance on the Mattis Dementia Rating Scale in patients with vascular dementia: relationships to neuroimaging findings," J. Geriatr. Psych. Neuro., Vol. 14, Issue 1, 33-6. Moser, D., Cohen, R., Paul, R., Paulsen, J., Ott, B., Gordon, N., Bell, S., Stone, W., 2001, "Executive function and magnetic resonance imaging subcortical hyperintensities in vascular dementia," Neuropsychiatry, Neuropsychol. Behav. Neurol., Vol. 14, Issue 2, 89-92.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Cohen, R.	Past	Gunstad, J. (2000-2001)	Gunstad, J., Paul, R., Cohen, R., Tate, D., Gordon, E., 2006, "Obesity is associated with memory deficits in young and middle-aged adults," <i>Eat Weight Disord.</i>, Vol. 11, Issue 1, 15-9. Gunstad, J., Paul, R., Brickman, A., Cohen, R., Arns, M., Roe, D., Lawrence, J., Gordon, E., 2006, "Patterns of cognitive performance in middle-aged and older-adults: a cluster analytic examination," <i>J. Geriatr. Psych. Neurol.</i>, Vol. 19, Issue 2, 59-64. Gunstad, J., Schfield, P., Paul, R., Sptznagel, M., cohen, R., Williams, L., Kohn, M., Gordon, E., 2006, "BDNF Val66Met polymorphism is associated with body mass index in healthy adults," <i>Neuropsychobio.</i>, Vol. 53, Issue 3, 153-6. Gunstad, J., Paul, R., Spitznagel, M., cohen, R., Williams, L., Kohn, M., Gordon, E., 2006, "Exposure to early life trauma is associated with adult obesity," <i>Psych. Res.</i>, Vol. 142, Issue 1, 31-7. Gunstad, J., Bausserman, L., Paul, R., Tate, D., Hoth, K., Poppas, A., Jefferson, A., Cohen, R., 2006, "C-reactive protein, but not homocysteine, is related to cognitive dysfunction in older adults with cardiovascular disease," <i>J. Clin. Neurosci.</i>, Vol. 13, Issue 5, 540-6. Gunstad, J., Cohen, R., Paul, R., Gordon, E., 2006, "Dissociation of the component processes of attention in healthy adults," <i>Arch. Clin. Neuropsychol.</i> Gunstad, J., Poppas, A., Smeal, S., Paul, R., Tate, D., Jefferson, A., Forman, D., Cohen, R., 2006, "Relation of brain natriuretic peptide levels to cognitive dysfunction in adults > 55 years of age with cardiovascular disease," <i>Am. J. Cardiol.</i>, Vol. 98, Issue 4, 538-40. Zimmerman, M., Brickman, A., Paul, R., Grieve, S., Tate, D., Gunstad, J., Cohen, R., Aloia, M., Williams, L., Clark, C., Whitford, T., Gordon, E., 2006, "The relationship between frontal gray matter volume and cognition varies across the healthy adult lifespan," <i>Am. J. Geriatr. Psych.</i>, Vol. 14, Issue 10, 823-33.
Cohen, R.	Past	Williams, K. (2000-2001)	No Publications
Cohen, R.	Past	Davis, K. (2001-2002)	No Publications
Cohen, R.	Past	Lange, K. (2001-2002)	Paul, R., Haque, O., Gunstad, J., Tate, D., Grieve, S., Hoth, K., Brickman, A., Cohen, R., Lange, K. , Jefferson, A., MacGregor, K., Gordon, E., 2005, "Subcortical hyperintensities impact cognitive function among a select subset of healthy elderly," <i>Arch. Clin. Neuropsych.</i> , Vol. 20, Issue 6, 697-704.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Cohen, R.	Past	Tate, D. (2002-2003)	Paul, R., Flanigan, T., Tashima, K., Cohen, R., Lawrence, E., Tate, D., Ritchie, C., Hinkin, C., 2005, "Apathy correlates with cognitive function but not CD4 status in patients with human immunodeficiency virus," J. Neuropsych. Clin. Neurosci., Vol. 17, Issue 1, 114-8. Gunstad, J., Paul, R., Cohen, R., Tate, D., Gordon, E., 2006, "Obesity is associated with memory deficits in young and middle-aged adults," Eat Weight Disord., Vol. 11, Issue 1, 15-9. Gunstad, J., Bausserman, L., Paul, R., Tate, D., Hoth, K., Poppas, A., Jefferson, A., Cohen, R., 2006, "C-reactive protein, but not homocysteine, is related to cognitive dysfunction in older adults with cardiovascular disease," J. Clin. Neurosci., Vol. 13, Issue 5, 540-6. Gunstad, J., Poppas, A., Smeal, S., Paul, R., Tate, D., Jefferson, A., Forman, D., Cohen, R., 2006, "Relation of brain natriuretic peptide levels to cognitive dysfunction in adults > 55 years of age with cardiovascular disease," Am. J. Cardiol., Vol. 98, Issue 4, 538-40. Cohen, R., Grieve, S., Hoth, K., Paul, R., Sweet, L., Tate, D., Gunstad, J., Stroud, L., McCaffery, J., Hitsman, B., Niaura, R., Clark, R., MacFarlane, A., Bryant, R., Gordon, E., Williams, L., 2006, "Early life stress and morphometry of the adult anterior cingulate cortex and caudate nuclei," Bio. Psych., Vol. 59, Issue 10, 975-82. Zimmerman, M., Brickman, A., Paul, R., Grieve, S., Tate, D., Gunstad, J., Cohen, R., Aloia, M., Williams, L., Clark, C., Whitford, T., Gordon, E., 2006, "The relationship between frontal gray matter volume and cognition varies across the healthy adult lifespan," Am. J. Geriatr. Psych., Vol. 14, Issue 10, 823-33. Brickman, A., Zimmerman, M., Paul, R., Grieve, D., Tate, D., Cohen, R., Williams, L., Clark, C., Gordon, E., 2006, "Regional white matter and neuropsychological functioning across the adult lifespan," Biol. Psych., Vol. 60, Issue 5, 444-53.
Cohen, R.	Past	Jefferson, A. (2002-2003)	Paul, R., Brickman, A., Navia, B., Hinkin, C., Malloy, P., Jefferson, A., Cohen, R., Tate, D., Flanigan, T., 2005, "Apathy is associated with volume of the nucleus accumbens in patients infected with HIV," J. Neuropsych. Clin. Neurosci., Vol. 17, Issue 2, 167-71. Paul, R., Haque, O., Gunstad, J., Tate, D., Grieve, S., Hoth, K., Brickman, A., Cohen, R., Lange, K., Jefferson, A., MacGregor, K., Gordon, E., 2005, "Subcortical hyperintensities impact cognitive function among a select subset of healthy elderly," Arch. Clin. Neuropsych., Vol. 20, Issue 6, 697-704. Gunstad, J., Bausserman, L., Paul, R., Tate, D., Hoth, K., Poppas, A., Jefferson, A., Cohen, R., 2006, "C-reactive protein, but not homocysteine, is related to cognitive dysfunction in older adults with cardiovascular disease," J. Clin. Neurosci., Vol. 13, Issue 5, 540-6. Gunstad, J., Poppas, A., Smeal, S., Paul, R., Tate, D., Jefferson, A., Forman, D., Cohen, R., 2006, "Relation of brain natriuretic peptide levels to cognitive dysfunction in adults > 55 years of age with cardiovascular disease," Am. J. Cardiol., Vol. 98, Issue 4, 538-40. Jefferson, A., Cahn-Weiner, D., Boyle, P., Paul, R., Moser, D., Gordon, N., Cohen, R., 2006, "Cognitive predictors of functional decline in vascular dementia," Intl. J. Geriatr. Psych., Vol. 21, Issue 8, 752-4.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Cohen, R.	Past	Brickman, A. (2002-2003)	Paul, R., Haque, O., Gunstad, J., Tate, D., Grieve, S., Hoth, K., Brickman, A., Cohen, R., Lange, K., Jefferson, A., MacGregor, K., Gordon, E., 2005, "Subcortical hyperintensities impact cognitive function among a select subset of healthy elderly," Arch. Clin. Neuropsych., Vol. 20, Issue 6, 697-704. Paul, R., Brickman, A., Navia, B., Hinkin, C., Malloy, P., Jefferson, A., Cohen, R., Tate, D., Flanigan, T., 2005, "Apathy is associated with volume of the nucleus accumbens in patients infected with HIV," J. Neuropsych. Clin. Neurosci., Vol. 17, Issue 2, 167-71. Gunstad, J., Paul, R., Brickman, A., Cohen, R., Arns, M., Roe, D., Lawrence, J., Gordon, E., 2006, "Patterns of cognitive performance in middle-aged and older-adults: a cluster analytic examination," J. Geriatr. Psych. Neurol., Vol. 19, Issue 2, 59-64. Zimmerman, M., Brickman, A., Paul, R., Grieve, S., Tate, D., Gunstad, J., Cohen, R., Aloia, M., Williams, L., Clark, C., Whitford, T., Gordon, E., 2006, "The relationship between frontal gray matter volume and cognition varies across the healthy adult lifespan," Am. J. Geriatr. Psych., Vol. 14, Issue 10, 823-33. Paul, R., Haque, O., Gunstad, J., Tate, D., Grieve, S., Hoth, K., Brickman, A., Cohen, R., Lange, K., Jefferson, A., MacGregor, K., Gordon, E., 2005, "Subcortical hyperintensities impact cognitive function among a select subset of healthy elderly," Arch. Clin. Neuropsych., Vol. 20, Issue 6, 697-704. Brickman, A., Zimmerman, M., Paul, R., Grieve, D., Tate, D., Cohen, R., Williams, L., Clark, C., Gordon, E., 2006, "Regional white matter and neuropsychological functioning across the adult lifespan," Biol. Psych., Vol. 60, Issue 5, 444-53.
Cohen, R.	Past	Hoth, K. (2004-2005)	Paul, R., Gunstad, J., Poppas, A., Tate, D., Foreman, D., Brickman, A., Jefferson, A., Hoth, K., Cohen, R., 2005, "Neuroimaging and cardiac correlates of cognitive function among patients with cardiac disease," Cerebrovasc. Disc., Vol. 20, Issue 2, 129-33. Gunstad, J., Cohen, R., Tate, D., Paul, R., Poppas, A., Hoth, K., MacGregor, K., Jefferson, A., 2005, "Blood pressure variability and white matter hyperintensities in older adults with cardiovascular disease," Blood Press., Vol. 14, Issue 6, 353-8. Paul, R., Haque, O., Gunstad, J., Tate, D., Grieve, S., Hoth, K., Brickman, A., Cohen, R., Lange, K., Jefferson, A., MacGregor, K., Gordon, E., 2005, "Subcortical hyperintensities impact cognitive function among a select subset of healthy elderly," Arch. Clin. Neuropsych., Vol. 20, Issue 6, 697-704. Gunstad, J., Bausserman, L., Paul, R., Tate, D., Hoth, K., Poppas, A., Jefferson, A., Cohen, R., 2006, "C-reactive protein, but not homocysteine, is related to cognitive dysfunction in older adults with cardiovascular disease," J. Clin. Neurosci., Vol. 13, Issue 5, 540-6. Cohen, R., Grieve, S., Hoth, K., Paul, R., Sweet, L., Tate, D., Gunstad, J., Stroud, L., MacCaffery, J., Hitsman, B., Niaura, R., Clark, C., MacFarlane, A., Bryant, R., Gordon, E., Williams, L., 2006, "Early life stress and morphometry of the adults anterior cingulate cortex and caudate nuclei," Biol. Psych., Vol. 59, Issue 10, 975-82.
Cohen, R.	Past	Okonkwo, O. (2009-2010)	No Publications
Cohen, R.	Past	Gauthier, L. (2010-2011)	No Publications

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Cohen, R.	Current	*Zahodne, L. (2011-2012)	Zahodne, L., Fernandez, H., 2008, "Course, prognosis, and management of psychosis in Parkinson's disease: are current treatments really effective?" <i>CNS Spectr.</i>, Vol. 13, Issue 3, 26-33, PMID: PMC3045851. Zahodne, L., Fernandez, H., 2008, "Pathophysiology and treatment of psychosis in Parkinson's disease: a review," <i>Drugs Aging</i>, Vol. 25, Issue 8, 665-82, PMID: PMC3045853. Zahodne, L., Okun, M., Foote, K., Fernandez, H., Rodriguez, R., Kirsch-Darrow, L., Bowers, D., 2009, "Cognitive declines one year after unilateral deep brain stimulation surgery in Parkinson's disease: a controlled study using reliable change," <i>Clin. Neuropsychol.</i>, Vol. 23, Issue 3, 385-405, PMID: PMC3045862. Zahodne, L., Young, S., Kirsch-Darrow, L., Nisenzon, A., Fernandez, H., Okun, M., Bowers, D., 2009, "Examination of the Lille Apathy Rating Scale in Parkinson disease," <i>Mov. Disord.</i>, Vol. 24, Issue 5, 677-83, PMID: PMC3045860. Kirsch-Darrow, L., Zahodne, L., Hass, C., Mikos, A., Okun, M., Fernandez, H., Bowers, D., 2009, "How cautious should we be when assessing pathy with the Unified Parkinson's Disease Rating Scale?" <i>Mov. Disord.</i>, Vol. 24, Issue 5, 684-8, PMID: PMC3045863. Zahodne, L., Okun, M., Foote, K., Fernandez, H., Rodriguez, R., Wu, S., Kirsch-Darrow, L., Jacobson, C., Rosado, C., Bowers, D., 2009, "Greater improvement in quality of life following unilateral deep brain stimulation surgery in the globus pallidus as compared to the subthalamic nucleus," <i>J. Neurol.</i>, Vol. 256, Issue 8, 1321-9, PMID: PMC3045861. Zahodne, L., Fernandez, H., 2010, "Parkinson's psychosis," <i>Curr. Treat. Options. Neurol.</i>, Vol. 12, Issue 3, 200-11, PMID: PMC3045857. Zahodne, L., Susatia, F., Bowers, D., Ong, T., Jacobson, S., Okun, M., Rodriguez, R., Malaty, I., Foote, K., Fernandez, H., 2011, "Binge eating in Parkinson's disease: prevalence, correlates and the contribution of deep brain stimulation," <i>J. Neuropsychiatry Clin. Neurosci.</i>, Vol. 23, Issue 1, 56-62, PMID: PMC3075093. Zahodne, L., Bowers, D., Price, C., Bauer, R., Nisenzon, A., Foote, K., Okun, M., 2011, "The case for testing memory with both stories and word lists prior to dbs surgery for Parkinson's Disease," <i>Clin. Neuropsychol.</i>, Vol. 25, Issue 3, 348-58, PMID: PMC3077807. Zahodne, L., Glymour, M., Sparks, C., Bontempo, D., Dixon, R., MacDonald, S., Manly, J., 2011, "Education does not slow cognitive decline with aging: 12-year evidence from the Victoria longitudinal study," <i>J. Int. Neuropsychol Soc.</i>, Vol. 17, Issue 6, 1039-46, PMID: PMC3285821. Zahodne, L., Marsiske, M., Okun, M., Rodriguez, R., Malaty, I., Bowers, D., 2012, "Mood and motor trajectories in Parkinson's disease: Multivariate latent growth curve modeling," <i>Neuropsychology</i>, Vol. 26, Issue 1, 71-80.
Dotson, V.	Current	*Kirton, J. (2010-)	No Publications
Ebner, N.	Past	None	
Foster, T.	Past	Aenlle, K. (2003-2009)	Aenlle, K., Kumar, A., Cui, L., Jackson, T., Foster, T., 2009, "Estrogen effects on cognition and hippocampal transcription in middle-aged mice," <i>Neurobiol. Aging</i>, Vol. 30, Issue 6, 932-45, PMID: PMC2730158. Aenlle, K., Foster, T., 2010, "Aging alters the expression of genes for neuroprotection and synaptic function following acute estradiol treatment," <i>Hippocampus</i>, Vol. 20, Issue 9, 1047-60, PMID: PMC2891324.

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Foster, T.	Past	Bodhinathan, K. (2005-2010)	Kumar, A., Bodhinathan, K., Foster, T., 2009, "Susceptibility to Calcium Dysregulation during Brain Aging," Front Aging Neurosci., Vol. 1, 2, PMCID: PMC2874411. Bodhinathan, K., Kumar, A., Foster, T., 2010, "Intracellular redox state alters NMDA receptor response during aging through Ca ²⁺ /calmodulin-dependent protein kinase II," J. Neurosci., Vol. 30, Issue 5, 1914-24, PMCID: PMC2853968. Bodhinathan, K., Kumar, A., Foster, T., 2010, "Redox sensitive calcium stores underlie enhanced after hyperpolarization of aged neurons: role for ryanodine receptor mediated calcium signaling," J. Neurophysiol., Vol. 104, Issue 5, 2586-93, PMCID: PMC2997029. Wu, K., Bodhinathan, K., Meyers, C. Chen, W., Campbell-Thompson, M., McIntyre, L., Foster, T., Muzyczka, N., Kumar, A., 2012, "Enhanced expression of Pctk1, Tcf12 and Cnd1 in hippocampus of rats: Impact on cognitive function, synaptic plasticity and pathology," Neurobiol. Learn. Mem., Vol. 97, Issue 1, 69-80.
Foster, T.	Past	Jackson, T. (2005-2010)	Aenlle, K., Kumar, A., Cui, L., Jackson, T. , Foster, T., 2009, "Estrogen effects on cognition and hippocampal transcription in middle-aged mice," Neurobiol. Aging, Vol. 30, Issue 6, 932-45, PMCID: PMC2730158. Jackson, T. , Foster, T., 2009, "Regional Health and Function in the hippocampus: Evolutionary compromises for a critical brain region," Biosci. Hypotheses, Vol. 2, Issue 4, 245-251, PMCID: PMC2713439. Jackson, T. , Verrier, J., Semple-Rowland, S., Kumar, A., Foster, T., 2010, "PHLPP1 splice variants differentially regulate AKT and PKC α signaling in hippocampal neurons: characterization of PHLPP proteins in the adult hippocampus," J. Neurochem., Vol. 115, Issue 4, 941-55.
Foster, T.	Current	Lee, W. (2006-)	Rangaraju, S., Hankins, D., Madorsky, I., Madorsky, E., Lee, W. , Carter, C., Leeuwenburgh, C., Notterpek, L., 2009, "Molecular architecture of myelinated peripheral nerves is supported by calorie restriction with aging," Aging Cell., Vol. 8, Issue 2, 178-91, PMCID: PMC2715941. Kumar, A., Rani, A., Tchigranova, O., Lee, W. , Foster, T., 2012, "Influence of late-life exposure to environmental enrichment or exercise on hippocampal function and CA1 senescent physiology," Neurobiol. Aging, Vol. 33, Issues 4, 828. Lee, W. , Kumar, A., Rani, A., Herrera, J., Xu, J., Someya, S., Foster, T., 2012, "Influence of viral vector-mediated delivery of superoxide dismutase and catalase to the hippocampus on spatial learning and memory during aging," Antioxid. Redox. Signal., Vol. 16, Issue 4, 339-50.
Foster, T.	Current	Guidi, M. (2009-)	No Publications
Foster, T.	Current	Han, X. (2009-)	No Publications
Foster, T.	Current	Bean, L. (2010-)	No Publications
Gonzalez-Rothi, L.	Past	Knight, A. (1997-2005)	No Publications
Gonzalez-Rothi, L.	Past	*Fritz, S. (1999-2004)	No Publications

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Gonzalez-Rothi, L.	Past	*Hollingsworth, A. (1999-2005)	No Publications
Gonzalez-Rothi, L.	Past	Saleem, A. (2000-2005)	Altmann, L., Saleem, A. , Kendall, S., Heilman, K., Rothi, L., 2006, "Orthographic directionality and thematic role illustration in English and Arabic," Brain Lang., Vol. 97, Issue 3, 306-16.
Gonzalez-Rothi, L.	Past	*Wierenga, C. (2001-2005)	Wierenga, C. , Benjamin, M., Gopinath, K., Perlstein, W., Leonard, C., Rothi, L., Conway, T., Cato, M., Briggs, R., Crosson, B., 2008, "Age-related changes in word retrieval: role of bilateral frontal and subcortical networks," Neurobiol. Aging, Vol. 29, Issue 3, 436-51. Crosson, B., Fabrizio, K., Singletary, F., Cato, M., Wierenga, C. , Parkinson, R., Sherod, M., Moore, A., Ciampitti, M., Holloway, B., Leon, S., Rodriguez, A., Kendall, D., Levy, I., Rothi, L., 2007, "Treatment of naming in nonfluent aphasia through manipulation of intention and attention: a phase 1 comparison of two novel treatments," J. Intl. Neuropsych. Soc., Vol. 13, Issue 4, 582-94. Wierenga, C. , Perlstein, W., Benjamin, M., Leonard, C., Rothi, L., Conway, T., Cato, M., Gopinath, K., Briggs, R., Crosson, B., 2009, "Neural substrates of object identification: functional magnetic resonance imaging evidence that category and visual attribute contribute to semantic knowledge," J. Intl. Neuropsych. Soc., Vol. 15, Issue 2, 169-81. Crosson, B., Moore, A., McGregor, K., Chang, Y., Benjamin, M., Gopinath, K., Sherod, M., Wierenga, C. , Peck, K., Briggs, R., Rothi, L., White, K., 2009, "Regional changes in word-production laterally after a naming treatment designed to produce a rightward shift in frontal activity," Brain Lang., Vol. 111, Issue 2, 73-85, PMID: PMC3239407.
Gonzalez-Rothi, L.	Past	*Ellis, C. (2002-2005)	No Publications
Gonzalez-Rothi, L.	Past	*Gaiefsky, M. (2002-2006)	Chang, L., Ernst, T., Witt, M., Ames, N., Gaiefsky, M. , Miller, E., 2002, "Relationships among brain metabolites, cognitive function, and viral loads in antiretroviral-naïve HIV patients," Neuroimage, Vol. 17, Issue 3, 1638-48. Peck, K., Moore, A., Crosson, B., Gaiefsky, M. , Gopinath, K., White, K., Briggs, R., 2004, "Functional magnetic resonance imaging before and after aphasia therapy: shifts in hemodynamic time to peak during an overt language task," Stroke, Vol. 35, Issue 2, 554-9. Peck, K., Wierenga, C., Moore, A., Maher, L., Gopinath, K., Gaiefsky, M. , Briggs, R., Crosson, B., 2004, "Comparison of baseline conditions to investigate syntactic production using functional magnetic resonance imaging," Neuroimage, Vol. 23, Issue 1, 104-10. Crosson, B., Moore, A., Gopinath, K., White, K., Wierenga, C., Gaiefsky, M. , Fabrizio, K., Peck, K., Soltysik, D., Milsted, C., Briggs, R., Conway, T., Gonzalez Rothi, L., 2005, "Role of the right and left hemispheres in recovery of function during treatment of intention in aphasia," J. Cogn. Neurosci., Vol. 17, Issue 3, 392-406.
Gonzalez-Rothi, L.	Past	*Charmichael, C. (2003-2008)	No Publications

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMCID)
Gonzalez-Rothi, L.	Past	*Rodriguez, A. (2004-2010)	Maher, L., Kendall, D., Swearingin, J., Rodriguez, A., Leon, S., Pingel, K., Holland, A., Rothi, L., 2006, "A pilot study of use-dependent learning in the context of Constraint Induced Language Therapy," J. Intl. Neuropsych. Soc., Vol. 12, Issue 6, 843-52. Raymer, A., Singletary, F., Rodriguez, A., Ciampitti, M., Heilman, K., Rothi, L., 2006, "Effects of gesture+verbal treatment for noun and verb retrieval in aphasia," J. Intl. Neuropsych. Soc., Vol. 12, Issue 6, 867-82. Crosson, B., Fabrizio, K., Singletary, F., Cato, M., Wierenga, C., Parkinson, R., Sherod, M., Moore, A., Ciampitti, M., Holiway, B., Leon, S., Rodriguez, A., Kendall, D., Levy, I., Rothi, L., 2007, "Treatment of naming in nonfluent aphasia through manipulation of intention and attention: a phase 1 comparison of two novel treatments," J. Intl. Neuropsych. Soc., Vol. 13, Issue 4, 582-94.
Gonzalez-Rothi, L.	Past	*Leon, S. (2004-2010)	Heilman, K., Leon, S., Rosenbek, J., 2004, "Affective aprosodia from a medial frontal stroke," Brain Lang., Vol. 89, Issue 3, 411-6. Rosenbek, J., Crucian, G., Leon, S., Hiber, B., Rodriguez, A., Holiway, B., Ketterson, T., Ciampitti, M., Heilman, K., Gonzalez-Rothi, L., 2004, "Novel treatments for expressive aprosodia: a phase I investigation of cognitive linguistic and imitative interventions," J. Int. Neuropsych. Soc., Vol. 10, Issue 5, 786-93. Leon, S., Rosenbek, J., Crucian, G., Hiber, B., Holiway, B., Rodriguez, A., Ketterson, T., Ciampitti, M., Freshwater, S., Heilman, K., Gonzalez-Rothi, L., 2005, "Active treatments for aprosodia secondary to right hemisphere stroke," J. Rehabil. Res. Dev., Vol. 42, Issue 1, 93-101. Rosenbek, J., Rodriguez, A., Hiber, B., Leon, S., Crucian, G., Ketterson, T., Ciampitti, M., Singltary, F., Heilman, K., Gonzalez-Rothi, L., 2006, "Effects of two treatments for aprosodia secondary to acquired brain injury," J. Rehabil. Res. Dev., Vol. 43, Issue 3, 379-90. Maher, L., Kendall, D., Swearingin, J., Rodriguez, A., Leon, S., Pingel, K., Holland, A., Rothi, L., 2006, "A pilot study of use-dependent learning in the context of Constraint Induced Language Therapy," J. Int. Neuropsych. Soc., Vol. 12, Issue 6, 843-52. Rothi, L., Fuller, R., Leon, S., Kendall, D., Moore, A., Wu, S., Crosson, B., Heilman, K., Naudeau, S., 2009, "Errorless practice as a possible adjuvant to donepezil in Alzheimer's disease," J. Int. Neuropsych. Soc., Vol. 15, Issue 2, 311-22, PMCID: PMC3010871.
Hall, A.	Past	Thompson, K. (2002-2011)	No Publications
Hall, A.	Current	Elliott, K. (2006-)	No Publications
Harman, J.	Past	Schold, J. (2004-2007)	Schold, J. , Harman, J., Chumbler, N., Duncan, R., Meier-Kriesche, H., 2009, "The pivotal impact of center characteristics on survival of candidates listed for deceased donor kidney transplantation," Med. Care, Vol. 47, Issue 2, 146-53.

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Harman, J.	Past	Jamoom, E. (2005-2010)	Jamoom, E. , Andresen, E., Neugaard, B., McKune, S., 2008, "The effect of caregiving on preventive care for people with disabilities," Disabil. Health J., Vol. 1, Issue 1, 51-7. Jamoom, E. , Horner-Johnson, W., Suzuki, R. Anresen, E., Campbell, V., RRTC Expert Panel on Health Status Measurement, 2008, "Age at disability onset and self-reported health status," BMC Public Health, Vol. 8, 10, PMCID: PMC2254400. Janicke, D., Harman, Jamoom, E. Simon, S., Zhang, J., Dumont-Driscoll, M., 2010, "The relationship among child weight status, psychosocial functioning, and pediatric health care expenditures in a Medicaid population," J. Pediatr. Psychol., Vol. 35, Issue 8, 883-91.
Harman, J.	Past	Chisholm, L. (2005-2010)	No Publications
Harman, J.	Past	Sundaram, S. (2005-2009)	No Publications
Harman, J.	Past	Pradhan, R. (2006-2010)	No Publications
Harman, J.	Past	Xin, H. (2006-2010)	No Publications
Harman, J.	Current	Ewigman, N. (2008-)	No Publications
Hass, C.	Past	Stewart, K. (2001-2008)	Stewart, K. , Cauraugh, J., Summers, J., 2006, "Bilateral movement training and stroke rehabilitation: a systematic review and meta-analysis," J. Neuro. Sci., Vol. 244, Issue 1-2, 89-95. Richards, L., Stewart, K. , Woodbury, M., Senesac, C., Cauraugh, J., 2008, "Movement-dependent stroke recovery: a systematic review and meta-analysis of TMS and fMRI evidence," Neuropsych., Vol. 46, Issue 1, 3-11, PMCID: PMC2248459. Stewart, K. , Fernandez, H., Okun, M., Jacobson, C., Hass, C., 2008, "Distribution of motor impairment influences quality of life in Parkinson's disease," Mov. Disord., Vol. 23, Issue 10, 1466-8. Stewart, K. , Fernandez, H., Okun, M., Rodriguez, E., Jacobson, C., Hass, C., 2009, "Side onset influences motor impairments in Parkinson disease," Parkinsonism Relat. Disord., Vol. 15, Issue 10, 781-3. Stewart, K. , Fernandez, H., Okun, M., Alberts, J., Malaty, I, Rodriguez, R., Hass, C., 2009, "Effects of dopaminergic medication on objective tasks of deftness, bradykinesia and force control," J. Neurol., Vol. 256, Issue 12, 2030-5.
Hass, C.	Past	Fournier, K. (2002-2008)	Fournier, K. , Hass, C., Naik, S., Lodha, N., Cauraugh, J., 2010, "Motor coordination in autism spectrum disorders: a synthesis and meta-analysis," J. autism Dev. Disord., Vol. 40, Issue 10, 1227-40. Fournier, K. , Kimberg, C., Radonovich, K., tillman, M., Chow, J., Lewis, M., Bodfish, J., Hass, C., 2010, "Decreased static and dynamic postural control in children with autism spectrum disorders," Gait Posture, Vol. 32, Issue 1, 6-9, PMCID: PMC2919314. Levy, C., Buman, M., Chow, J., Tillman, M., Fournier, K. , Giacobbi, P., 2010, "Use of power assist wheels results in increased tveled compared with conventional manual wheeling," AM. J. Med. Rehab., Vol. 89, Issue 8, 625-34.

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Hass, C.	Past	Vallabhajosula, S. (2006-2010)	No Publications
Hass, C.	Current	Amano, S. (2008-)	No Publications
Horgas, A.	Past	Floetke Elliott, A. (2001-2006)	Horgas, A., Elliott, A. , 2004, "Pain assessment and management in persons with dementia," Nurs. Clin. North Am., Vol. 39, Issue 3, 593-606. Elliott, A. , Horgas, A., Marsiske, M., 2008, "Nurses' role in identifying mild cognitive impairment in older adults," Geriatr. Nurs., Vol. 29, Issue 1, 38-47, PMID: PMC2268752. Elliott, A. , Horgas, A., 2009, "Effects of an analgesic trial in reducing pain behaviors in community-dwelling older adults with dementia," Nurs. Res., Vol. 58, Issue 2, 140-5.
Horgas, A.	Past	Onubogu, U. (2003-2008)	Horgas, A., Onubogu, U. , 2005, "Cognitive therapy for chronic pain: a review," Contemp. Gerontol., Vol. 11, Issue 4, 174-5. Onubogu, U. , Horgas, A., 2005, "Pain, somatization, and emotional distress in older adults," The Gerontol., Vol. 45, 290. Onubogu, U. , Horgas, A., 2006, "Symptom clusters in elderly with chronic non-malignant pain," The Gerontol., Vol. 46, 401. Onubogu, U. , Horgas, A., Marsiske, M., 2009, "Pain, pain medications, and functional outcomes among older adults with arthritis," The Gerontol., Vol. 49.
Horgas, A.	Past	Grall, M. (2007-2010)	Grall, M. , Horgas, A., 2011, "Relationship between dementia and pain management in hospitalized elders: a medical record review," Southern Nurs. Res. Soc. Horgas, A., Yoon, S., Grall, M. , 2012, "Pain management in older adults," In Boltz, M., Capezuti, E., Fulmer, T., Zwicker, S., (Eds.), Evidence –Based Geriatric Nursing Protocols for Best Practice, 4 th ed. 246-67.
Horgas, A.	Current	Ahn, H. (2007-)	Ahn, H. , Horgas, A., 2012, "Prevalence of pain and related disruptive behaviors in Florida nursing home residents with dementia," J. Am. Geriatr. Soc. Ahn, H. , Horgas, A., 2012, "The relationship between pain and agitated behaviors in Florida nursing home residents with dementia," Nurs. Res. Ahn, H. , Horgas, A., 2012, "Is pain a mediator or moderator in the relationship between cognitive and aggressive behaviors?" J. Am. Geriatr. Soc.
Horgas, A.	Current	Daniel, C. (2008-)	No Publications
Horgas, A.	Current	Ellis, L. (2010-)	No Publications

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Horgas, A.	Current	Glover, T. (2010-)	Riley, J., Hastie, B., Glover, T., Fillingim, R., Staud, R., Campbell, C., 2010, "Cognitive-affective and somatic side effects of morphine and pentazocine: side-effect profiles in healthy adults," Pain Med., Vol. 11, Issue 2, 195-206. Kindle, L., Sibille, K., Glover, T., Staud, R., Riley, J., Fillingim, R., 2011, "Drug response profiles to experimental pain are opioid and pain modality specific," J. Pain, Vol. 12, Issue 3, 340-51, PMID: PMC3052955. Sibille, K., Kindler, L., Glover, T., Gonzalez, R., Staud, R., Riley, J., Fillingim, R., 2011, "Individual differences in morphine and butorphanol analgesia: a laboratory pain study," Pain Med., Vol. 12, Issue 7, 1076-85. Sibille, K., Langae, T., Burkley, B., Gong, Y., Glover, T., King, C., Riley, J., Leeuwenburgh, C., Staud, R., Bradley, L., Fillingim, R., 2012, "Chronic pain, perceived stress, and cellular aging: an exploratory study," Mol. Pain, Vol. 8, Issue 12, PMID: PMC3298803. Dibille, K., Kindler, L., Glover, T., Staud, R., Riley, J., Fillingim, R., 2012, "Affect balance style, experimental pain sensitivity, and pain-related responses," Clin. J. Pain, Vol. 28, Issue 5, 410-7.
Leeuwenburgh, C.	Past	Hiona, A. (2001-2007)	Hiona, A., Leeuwenburgh, C., 2004, "Effects of age and caloric restriction on brain neuronal cell death/survival," Ann. NY Acad. Sci., Issue 1019, 96-105. Sanz, A., Hiona, A., Kujoth, G., Seo, A., Hofer, T., Kouwenhoven, E., Kalani, R., Prolla, T., Barja, G., Leeuwenburgh, C., 2007, "Evaluation of sex differences on mitochondrial bioenergetics and apoptosis in mice," Exp. Gerontol., Vol. 42, Issue 3, 173-82, PMID: PMC1817668. Hiona, A., Leeuwenburgh, C., 2008, "The role of mitochondrial DNA mutations in aging and sarcopenia: implications for the mitochondrial vicious cycle theory of aging," Exp. Gerontol., Vol. 43, Issue 1, 24-33, PMID: PMC2225597. Marzetti, E., Lawler, J., Hiona, A., Manini, T., Seo, A., Leeuwenburgh, C., 2008, "Modulation of age-induced apoptotic signaling and cellular remodeling by exercise and calorie restriction in skeletal muscle," Free Radic. Biol. Med., Vol. 44, Issue 2, 160-8. Hiona, A., Wu, J., 2008, "Noninvasive radionuclide imaging of cardiac gene therapy: progress and potential," Nat. Clin. Pract. Cardiovasc. Med., Vol. 5, 87-95. Hofer, T., Servais, S., Seo, A., Marzetti, E., Hiona, A., Upadhyay, S., Wohlgemuth, S., Leeuwenburgh, C., 2009, "Bioenergetics and permeability transition pore opening in heart subsarcolemmal and interfibrillar mitochondria: effects of aging and lifelong calorie restriction," Mech. Aging Dev., Vol. 130, Issue 5, 297-307, PMID: PMC2680750. Hiona, A., Sanz, A., Kujoth, G., Pamplona, R., Seo, A., Hofer, T., Someya, S., Miyakawa, T., Nakayama, C., Samhan-Arias, A., Servais, S., Barger, J., Portero-Cailliau, M., Tanokura, M., Prolla, T., Leeuwenburgh, C., 2010, "Mitochondrial DNA mutations induce mitochondrial dysfunction, apoptosis and sarcopenia in skeletal muscle of mitochondrial DNA mutator mice," PLoS One, Vol. 5, Issue 7, PMID: 2898813. Xie, X., Hiona, A., Lee, A., Cao, F., Huang, M., Li, Z., Cherry, A., Pei, X., Wu, J., 2011, "Effects of long-term culture on human embryonic stem cell aging," Stem Cells Dev., Vol. 20, Issue 1, 127-38, PMID: PMC3020125.

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Leeuwenburgh, C.	Past	Seo, A. (2004-2010)	Hofer, T., Seo, A., Prudencio, M., Leeuwenburgh, C., 2006, "A method to determine RNA and DNA oxidation simultaneously by HPLC-ECD: greater RNA than DNA oxidation in rat liver after doxorubicin administration," <i>Bio. Chem.</i>, Vol. 387, Issue 1, 103-11. Seo, A., Hofer, T., Sung, B., Judge, S., Chung, H., Leeuwenburgh, C., 2006, "Hepatic oxidative stress during aging: effects of 8% long-term calorie restriction and lifelong exercise," <i>Antioxid. Redox. Signal</i>, Vol. 8, Issue 3-4, 529-38. Sanz, A., Hiona, A., Kujoth, G., Seo, A., Hofer, T., Kouwenhoven, E., Kalani, R., Prolla, T., Barja, G., Leeuwenburgh, C., 2007, "Evaluation of sex differences on mitochondrial bioenergetics and apoptosis in mice," <i>Exp. Gerontol.</i>, Vol. 42, Issue 3, 173-82, PMID: PMC1817668. Carter, C., Hofer, T., Seo, A., Leeuwenburgh, C., 2007, "Molecular mechanisms of life- and health-span extension: role of calorie restriction and exercise intervention," <i>Appl. Physiol. Nutr. Metab.</i>, Vol. 32, Issue 5, 954-66. Marzetti, E., Lawler, J., Hiona, A., Manini, T., Seo, A., Leeuwenburgh, C., 2008, "Modulation of age-induced apoptotic signaling and cellular remodeling by exercise and calorie restriction in skeletal muscle," <i>Free Radic. Biol. Med.</i>, Vol. 44, Issue 2, 160-8. Chung, J., Seo, A., Chung, S., Kim, M., Leeuwenburgh, C., Yu, C., Chung, H., 2008, "Molecular mechanism of PPAR in the regulation of age-related inflammation," <i>Aging Res. Rev.</i>, Vol. 7, Issue 2, 126-36. Hofer, T., Marzetti, E., Xu, J., Seo, A., Gulec, S., Knutson, M., Leeuwenburgh, C., Dupont-Versteegden, E., 2008, "Increased iron content and RNA oxidative damage in skeletal muscle with aging and disuse atrophy," <i>Exp. Gerontol.</i>, Vol. 43, Issue 6, 563-70, PMID: PMC2601529. Seo, A., Xu, J., Servais, S., Hofer, T., Marzetti, E., Wohlgemuth, S., Knutson, M., Chung, Y., Leeuwenburgh, C., 2008, "Mitochondrial iron accumulation with age and functional consequences," <i>Aging Cell</i>, Vol. 7, Issue 5, 706-16. Chung, S., Kim, M., Chung, J., Kim, D., Choi, J., Anton, S., Seo, A., Park, K., Yokozawa, T., Rhee, S., Yu, B., Chung, H., 2009, "Peroxisome proliferator-activated receptor activation by a short-term feeding of zingerone in aged rats," <i>J. Med. Food</i>, Vol. 12, Issue 2, 345-50. Xu, J., Marzetti, E., Seo, A., Kim, J., Prolla, T., Leeuwenburgh, C., 2010, "The emerging role of iron dyshomeostasis in the mitochondrial decay of aging," <i>Mech. Aging Dev.</i>, Vol. 131, Issue 7-8, 487-93, PMID: PMC2958063. Seo, A., Joseph, A., Dutta, D., Hwang, J., Aris, J., Leeuwenburgh, C., 2010, "New insights into the role of mitochondria in aging: mitochondrial dynamics and more," <i>J. Cell Sci.</i>, Vol. 123, Issue 15, 2533-42, PMID: PMC2912461. Aris, J., Fishwick, L., Marrafini, M., Seo, A., Leeuwenburgh, C., Dunn, W., 2012, "Amino acid homeostasis and chronological longevity in <i>Saccharomyces cerevisiae</i>," <i>Subcell Biochem.</i>, Vol. 57, 161-86.
Leeuwenburgh, C.	Current	Dutta, D. (2006-)	Seo, A., Joseph, A., Dutta, D., Hwang, J., Aris, J., Leeuwenburgh, C., 2010, "New insights into the role of mitochondria in aging: mitochondrial dynamics and more," <i>J. Cell Sci.</i>, Vol. 123, Issue 15, 2533-42, PMID: PMC2912461. Dutta, D., Calvani, R., Bernabei, R., Leeuwenburgh, C., Marzetti, E., 2012, "Contribution of impaired mitochondrial autophagy to cardiac aging: mechanisms and therapeutic opportunities," <i>Circ. Res.</i>, Vol. 110, Issue 8, 1125-38.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Lutz, B.	Past	Gwin, D. (2003-2009)	No Publications
Lutz, B.	Past	Abendroth, M. (2006-2010)	Abendroth, M. , Lutz, B., Young, M., 2012, "Family caregivers' decision process to institutionalize persons with Parkinson's disease: A grounded theory study," Int. J. Nurs. Stud., Vol. 49, Issue 4, 445-54.
Lutz, B.	Current	Cook, C. (2008-)	No Publications
Lutz, B.	Current	MacGregor, T. (2008-)	Aldana, P., MacGregor, T. , James, H., Marcus, R., Indelicato, D., 2010, "Titanium screws as fiducial markers for image-guided stereotactic proton irradiation in pediatric central nervous system tumors: a technical report," Pediatr. Neurosurg., Vol. 46, Issue 3, 227-31. Jame, H., MacGregor, T. , Aldana, P., 2011, "creating a working group for prenatal diagnosis and management as a venue to facilitate neurosurgery health care delivery," Pediatr. Neurosurg., Vol. 47, Issue 3, 176-9. James, H., MacGregor, T. , Postlethwait, R., Hofrichter, P., Aldana, P., 2012, "Advanced registered nurse practitioners and nurse practitioners and physician assistants in the practice of pediatric neurosurgery: a clinical report," Pediatr. Neurosurg.
Lutz, B.	Current	Stone, S. (2009-)	No Publications
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Manini, T.	Current	Higgins, T. (2007-)	Barnes, R., Coombes, S., Armstrong, N., Higgins, T. , Janelle, C., 2010, "Evaluating attentional and affective changes following an acute exercise bout using a modified dot-probe protocol," J. Sports Sci., Vol. 28, Issue 10, 1065-76, PMID: PMC3042253. Naugle, K., Higgins, T. , Manini, T., 2012, "Obesity and use of compensatory strategies to perform common daily activities in pre-clinically disabled older adults," Arch. Gerontol. Geriatr., Vol. 54, Issue 2, 134-8.
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Mann, W.	Past	Davenport, R. (1997-2007)	Davenport, R. , Vaidean, G., Jones, C., Chandler, A., Kessler, L., Mion, L., Shorr, R., 2009, "Falls following discharge after an in-hospital fall," BMC Geriatr., Vol. 9, 53, PMID: PMC2790437.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Mann, W.	Past	Belchior, P. (2001-2008)	Mann, W., Belchior, P., Tomita, M., Kemp, B., 2005, "Computer use by middle-aged and older adults with disabilities," Tech. Disab., Vol. 17, 1-9. Mann, W., Belchior, P., Tomita, M., Kemp, B., 2005, "Use of personal emergency systems by older individuals with disabilities," Assist. Tech., Vol. 17, 82-8. Mann, W., Belchior, P., Tomita, M., Kemp, B., 2005, "Barriers to use of traditional telephone by older adults with chronic health conditions," Occup. Part. Hlth., Vol. 25, Issue 4, 160-6. Lin, S., Witte, M., Belchior, P., Mann, W., 2005, "Home safety and modification for older adults with visual impairment," Aging Vision., Vol. 17, Issue 1, 4-7. Stav, W., Justiss, M., Belchior, P., Lanford, D., 2006, "Clinical practice in driving rehabilitation," Tops. Geriatr. Rehab., Vol. 22, Issue 2, 153-61. Mann, W., Belchior, P., Tomita, M., Kemp, B., 2007, "Older adults' perception of PDAs, home automation systems and home health monitoring systems," Tops. Geriatr. Rehab., Vol. 23, Issue 1, 35-46. Classen, S., Shechtman, P., Stephens, B., Davis, E., Justiss, M., Bendixen, R., Belchior, P., Sandhu, M., Posse, C., McCarthy, D., Mann, W., 2007, "The impact of roadway intersection design on driving performance of young and senior adults," J. Traff. Inj. Prev., Vol. 8, Issue 1, 69-77. Shechtman, O., Classen, S., Stephens, B., Bendixen, R., Belchior, P., Sandhu, M., McCarthy, D., Mann, W., Davis, E., 2007, "The impact of intersection design on simulated driving performance of young and senior adults," J. Traff. Inj. Prev., Vol. 8, Issue 1, 78-86. Witte-Bewernitz, M., Mann, W., Belchior, P., 2009, "Feasibility of machine-based prompting to assist persons with dementia," Asst. Tech., Vol. 24, Issue 4, 196-207.
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Mann, W.	Past	McCarthy, D. (2002-2005)	Stephens, B., McCarthy, D., Marsiske, M., Shechtman, O., Classen, S., Justiss, M., Mann, W., 2005, "International older driver consensus conference on assessment, remediation and counseling for transportation alternatives: summary and recommendations," Phys. Occup. Ther. Geriatr., Vol. 23, Issue 2-3, 103-21, PMID: PMC2910424. Stav, W., Justiss, M., McCarthy, D., Mann, W., Lanford, D., 2008, "Predictability of clinical assessments for driving performance," J. Safety Res., Vol. 39, Issue 1, 1-7.
Mann, W.	Past	Bendixen, R. (2002-2006)	Bendixen, R., Mann, W., Tomita, M., 2005, "The relationship of home range to functional status and cognitive status of frail elders," Phys. Occup. Ther. Geriatr., Vol. 23, Issue 2-3, 43-62. Levy, C., Berner, T., Bendixen, R., 2005, "Rehabilitation for individuals with fibrodysplasia ossificans progressive," Clin. Rev. Bone Min. Metabol., Vol. 3, Issue 3-4, 251-6. Classen, S., Shechtman, O., Stephens, B., Davis, E., Justiss, M., Bendixen, R., Belchior, P., Sandhu, M., Posse, C., McCarthy, D., Mann, W., 2006, "The impact of roadway intersection design on driving performance of young and senior adults: preliminary results," Geriatr. Rehab., Vol. 22, Issue 1, 18-26. Bendixen, R., Horn, K., Levy, C., 2007, "Using telerehabilitation to support elders with chronic illness in their homes," Geriatr. Rehab., Vol. 23, Issue 1, 47-51. Classen, S., Shechtman, O., Stephens, B., Davis, E., Justiss, M., Bendixen, R., Belchior, P., Sandhu, M., Posse, C., McCarthy, D., Mann, W., 2007, "The impact of roadway intersection design on driving performance of young and senior adults," Traff. Inj. Prev., Vol. 8, Issue 1, 69-77. Bendixen, R., Levy, C., Lutz, B., Horn, K., Chronister, K., Mann, W., 2008, "A telerehabilitation model for victims of polytrauma," Rehabil. Nurs., Vol. 33, Issue 5, 215-20. Bendixen, R., Levy, C., Olive, E., Kobb, R., Mann, W., 2009, "Cost effectiveness of a telerehabilitation program to support chronically ill and disabled elders in their homes," Telemedicine and e-Health, Vol. 15, Issue 1, 31-8. Reynolds, S., Bendixen, R., Lawrence, T., Lane, S., 2011, "A pilot study examining activity participation, sensory responsiveness, and competence in children with high functioning autism spectrum disorder," J. Autism Devel. Disord., Vol. 41, Issue 11, 1496-1506. Elder, J., Donaldson, S., Kairalla, J., Valcante, G., Bendixen, R., Ferdig, R., Self, E., Walker, J., Palau, C., Serrano, M., 2011, "In-home training for fathers of children with autism: a follow up study and evaluation of four individual training components," J. Child Fam. Stud., Vol. 20, Issue 3, 263-71. Bendixen, R., Elder, J., Donaldson, S., Kairalla, J., Valcante, G., Ferdig, R., 2011, "Effects of a father-based in-home intervention on perceived stress and family dynamics in parents of children with autism," Am. J. Occup. Ther., Vol. 65, Issue 6, 679-87. Akima, H., Lott, D., Senesac, C., Deol, J., Germain, S., Arpan, I., Bendixen, R., Sweeney, H., Walter, G., Vandenbourne, K., 2011, "Relationships of thigh muscle contractile and non-contractile tissue with function, strength, and age in boys with Duchenne muscular dystrophy," Neuromusc. Disord., Vol. 22, Issue 1, 16-25. Bendixen, R., Kreider, C., 2011, "Review of occupational therapy research in the practice area of children and youth," Am. J. Occup. Ther., Vol. 65, Issue 3, 351-9.
Mann, W.	Past	Johnson, J. (2003-2008)	Mann, W., Johnson, J., Lynch, L., Justiss, M., Tomita, M., Wu, S., 2008, "Changes in impairment level, functional status, and use of assistive devices by older people with depressive symptoms," Am. J. Occup. Ther., Vol. 62, Issue 1, 9-17.

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Mann, W.	Current	Kreider, C. (2007-)	Bendixen, R., Kreider, C. , 2011, "Review of occupational therapy research in the practice area of children and youth," Am. J. Occup. Ther., Vol. 65, Issue 3, 351-9, PMID: PMC3117256.
Marsiske, M.	Past	Belchior, P. (2001-2008)	Mann, W., Belchior, P. , Tomita, M., Kemp, B., 2005, "Computer use by middle-aged and older adults with disabilities," Tech. Disab., Vol. 17, 1-9. Mann, W., Belchior, P. , Tomita, M., Kemp, B., 2005, "Use of personal emergency systems by older individuals with disabilities," Assist. Tech., Vol. 17, 82-8. Mann, W., Belchior, P. , Tomita, M., Kemp, B., 2005, "Barriers to use of traditional telephone by older adults with chronic health conditions," Occup. Part. Hlth., Vol. 25, Issue 4, 160-6. Lin, S., Witte, M., Belchior, P. , Mann, W., 2005, "Home safety and modification for older adults with visual impairment," Aging Vision., Vol. 17, Issue 1, 4-7. Stav, W., Justiss, M., Belchior, P. , Lanford, D., 2006, "Clinical practice in driving rehabilitation," Tops. Geriatr. Rehab., Vol. 22, Issue 2, 153-61. Mann, W., Belchior, P. , Tomita, M., Kemp, B., 2007, "Older adults' perception of PDAs, home automation systems and home health monitoring systems," Tops. Geriatr. Rehab., Vol. 23, Issue 1, 35-46. Classen, S., Shechtman, P., Stephens, B., Davis, E., Justiss, M., Bendixen, R., Belchior, P. , Sandhu, M., Posse, C., McCarthy, D., Mann, W., 2007, "The impact of roadway intersection design on driving performance of young and senior adults," J. Traff. Inj. Prev., Vol. 8, Issue 1, 69-77. Shechtman, O., Classen, S., Stephens, B., Bendixen, R., Belchior, P. , Sandhu, M., McCarthy, D., Mann, W., Davis, E., 2007, "The impact of intersection design on simulated driving performance of young and senior adults," J. Traff. Inj. Prev., Vol. 8, Issue 1, 78-86. Witte-Bewernitz, M., Mann, W., Belchior, P. , 2009, "Feasibility of machine-based prompting to assist persons with dementia," Asst. Tech., Vol. 24, Issue 4, 196-207.
Marsiske, M.	Past	*McCoy, K. (2002-2004)	Cook, S.E., Marsiske, M., McCoy, K (2009). The use of the modified Telephone Interview for Cognitive Status (TICS-M) in the detection of amnesic mild cognitive impairment. J. Geriatric Psychiatry Neurol, 22(2), 103-9. Dzierzewski, J., Williams, J., Roditi, D., Marsiske, M., McCoy, K. , McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMID: PMC2924958.
Marsiske, M. (Chair was Perlstein)	Past	Dotson, V. (2002-2006)	Perlstein, W., Larson, M., Dotson, V. , Kelly, K., 2006, "Temporal dissociation of components of cognitive control dysfunction in severe TBI: ERPs and the cued-Stroop task," Neuropsych., Vol. 44, Issue 2, 260-84. Larson, M., Perlstein, W., Stigge-Kaufman, D., Kelly, K., Dotson, V. , 2006, "Affective context-induced modulation of the error-related negativity," Neuroreport, Vol. 17, Issue 3, 329-33. Dotson, V. , Singletary, F., Fuller, R., Koehler, S., Moore, A., Gonzalez-Rothi, L., Crosson, B., 2007, "Treatment of word-finding deficits in fluent aphasia through the manipulation of spatial attention: preliminary findings," Aphasiology, Vol. 22, Issue 1, 103-113, PMID: PMC3225083. Dotson, V. , Schinka, J., Brown, L., Mortimer, J., Borenstein, A., 2008, "Characteristics of the Florida cognitive activities scale in older African Americans," Assess., Vol. 15, Issue 1, 72-7. Dotson, V. , Resnick, S., Zonderman, A., 2008, "Differential association of concurrent, baseline, and average depressive symptoms with cognitive decline in older adults," Am. J. Geriatr. Psych., Vol. 16, Issue 4, 318-30, PMID: PMC2405887.

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Marsiske, M.	Past	*Cook, S. (2002-2008)	Crowe, M., Andel, R., Wadley, V., Cook, S., Unverzagt, F., Marsiske, M., Ball, K., 2006, "Subjective cognitive function and decline in older adults with psychometrically defined amnesic MCI," Intl. J. Geriatr. Psych., Vol. 21, 1187-92. Cook, S., Marsiske, M., 2006, "Subjective memory beliefs and cognitive performance in normal and mildly impaired older adults," Aging Mental Hlth., Vol. 10, 413-23. Wadley, V., Crowe, M., Marsiske, M., Cook, S., Unverzagt, F., Rosenberg, A., Rexroth, D., 2007, "Changes in everyday function among individuals with psychometrically defined Mild Cognitive Impairment in the ACTIVE study," J. Am. Geriatr. Soc., Vol. 55, 1192-8. Cook, S., Marsiske, M., McCoy, K., 2009, "The use of the modified Telephone Interview for Cognitive Status (TICS-M) in the detection of amnesic mild cognitive impairment," J. Geriatr. Psych. Neurol., Vol. 22, Issue 2, 103-9. Persad, C., Cook, S., Giordani, B., 2010, "Assessing falls in the elderly: should we use simple screening tests or a comprehensive fall risk evaluation," Eur. J. Psych. Rehab. Med., Vol. 46, 249-59. Parisi, J., Gross, A., Rebok, G., Saczynski, J., Crowe, M., Cook, S., Langbaum, J., Satori, A., Unverzagt, F., "Modeling change in memory performance and perceptions: findings from the ACTIVE study," Psych. Aging.
Marsiske, M.	Past	*Aiken Morgan, A. (2002-2008)	Aiken Morgan, A., Marsiske, M., Dzierzewski, J., Jones, R., Whitfield, K., Johnson, K., Cresci, M., 2010, "Race-related cognitive test bias in the active study: a mimic model approach," Exp. Aging Res., Vol. 36, Issue 4, 426-52, PMID: PMC2941916 Buman, Mp, Giacobbi, P, Dzierzewski, J., Aiken Morgan, A., McCrae, C., Roberts, B., Marsiske, M. 2011, Peer volunteers improve long-term maintenance of physical activity with older adults: a randomized controlled trial. J. Phys Act Health, Spuul 2; S257-66.
Marsiske, M.	Current	*Dzierzewski, J. (2006-)	McCrae, C., McNamara, J., Rowe, M., Dzierzewski, J., Dirk, J., Marsiske, M., Craggs, J., 2008, "Sleep and affect in older adults: using multilevel modeling to examine daily associations," J. Sleep Res., Vol. 17, Issue 1, 42-53, PMID: PMC2923492. Dzierzewski, J., O'Brien, E., Kay, D., McCrae, C., 2010, "Tackling sleeplessness: psychological treatment options for insomnia in older adults," Nat. Sci. Sleep, Vol. 2, 47-61, PMID: PMC3273867. Dzierzewski, J., Williams, J., Roditi, D., Marsiske, M., McCoy, K., McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMID: PMC2924958. Aiken Morgan, A., Marsiske, M., Dzierzewski, J., Jones, R., Whitfield, K., Johnson, K., Cresci, M., 2010, "Race-related cognitive test bias in the active study: a mimic model approach," Exp. Aging Res., Vol. 36, Issue 4, 426-52, PMID: PMC2941916.

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Marsiske, M.	Current	*Sisco, S. (2006-)	Little, D.M., Shin, S.S., Sisco, S.M., Thulborn, K.R. (2006). Event-related fMRI of category learning: differences between classification and feedback. <i>Brain and Cognition</i>. 60(3), 244-252. Sisco, S.M., Gross, A., Rebok, G., & Marsiske, M. (under review). Influence of cognitive training on the quality of recall for short stories. Submitted as part of a special issue to the <i>Journal of Aging and Health</i>, March 2012. Sisco, S.M., & Marsiske, M. (under review). Neighborhood influences on cognitive level and response to training in the ACTIVE study. Submitted to the <i>Journal of Aging Research</i>, March 2012. Cook, S.E., Sisco, S.M., & Marsiske, M. (under review). Dual-Task Effects of Simulated Lane Navigation and Story Recall in Older Adults with and without Memory Impairment. Submitted as a revision in March 2012 to <i>Aging, Neuropsychology, and Cognition</i>. Belchior, P., Marsiske, M., Sisco, S., Yam, A., & Mann, W. (under review). The impact of video game training on selective visual attention in older adults. Submitted in September 2011 to <i>BMJOpen</i> Sisco, S.M., Price, C., Freedland, A., Cunningham, H., Okun, M.S., & Bowers, D. (in preparation) Assessing interference independent of processing speed on the Stroop test in a Parkinson's disease sample. To be submitted to the <i>Journal of the International Neuropsychological Society</i> in May 2012.
Marsiske, M.	Current	*Yam, A. (2008-)	Belchior, P., Marsiske, M., Sisco, S., Yam, A., & Mann, W. (in press). Older adults' engagement with a video game training program. <i>Activities, Adaptation and Aging</i>. Belchior, P., Marsiske, M., Sisco, S., Yam, A., Mann, W., Bavelier, D., & Ball, K. K. (under review). The Impact of videogame training on selective visual attention in older adults. <i>PLoS ONE</i> Yam, A. & Marsiske, M (under review). Cognitive Longitudinal Predictors of Older Adults' Self-Reported IADL Function. <i>Aging and Health</i>. Yam, A., & Marsiske, M. (under review). Trajectories of 10-Year Longitudinal Change in Older Adults' Basic and Everyday Cognitive Abilities. <i>Journal of Gerontology: Psychological Sciences</i>.
Marsiske, M.	Current	*Thomas, K. (2010-)	Thomas K.R., Marsiske, M., Unverzagt, F.W. (Feb. 2012). Verbal Prompts as a Method for Improving Everyday Cognition in MCI and Unimpaired Older Adults. <i>Journal of the International Neuropsychological Society</i>. Thomas K.R., Gregory, A.M., Williams, R.E., Delis, D.C., Bondi, M.W. & Twamley, E.W. (Feb. 2011). Cognitive Efficiency in Veterans with TBI is Reduced by Psychiatric Symptom Severity, Not Post-Concussive Symptoms. <i>Journal of the International Neuropsychological Society</i>, 17(S1), 249. Thomas K.R., Williams, R.E., Bondi, M.W., Delis, D.C., & Twamley, E.W. (Feb. 2010). Supported Employment Plus Cognitive Training for Veterans with Traumatic Brain Injury. <i>Journal of the International Neuropsychological Society</i>, 16(S1), 139. Marsiske, M., Dzierzewski, J.M., Thomas K.R., Kasten, L., Jones, R., Johnson, K., Willis, S.L., Whitfield, K., Ball, K., Rebok, G. (under review). Race-related Disparities in Five-year Cognitive Change in ACTIVE Control Participants. <i>Journal of Aging and Health</i>. Cook, S.E., Marsiske, M., Thomas K.R., Unverzagt, F.W., Wadley, V.G., Langbaum, J.B.S., Crowe, M. (in revisions). Identification of Mild Cognitive Impairment in ACTIVE: Algorithmic Classification and Stability. <i>Journal of the International Neuropsychological Society</i>.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
McCrae, C.	Past	*Cross, N. (2004-2009)	Stutts, L., Cross, N., Conti, J., Sears, S., 2007, "Examination of research trends on patient factors in patients with implantable cardioverter defibrillators," Clin. Cardiol., Vol. 30, Issue 1, 64-8. Cross, N., McCrae, C., Smith, K., Conti, J., Sears, S., 2010, "Comparison of actigraphic and subjective measures of sleep in implantable cardioverter defibrillator and coronary artery disease patients," Clin. Cardiol., Vol. 33, Issue 12, 753-9.
McCrae, C.	Past	Dautovich, N. (2004-2010)	McCrae, C., Rowe, M., Tierney, C., Dautovich, N., Definis, A., McNamara, J., 2005, "Subjective and objective sleep patterns, sleep complaints, subjective and objective sleep patterns, health, psychological adjustment, and daytime functioning in community-dwelling older adults," J. Gerontol. B. Psychol. Sci. Soc. Sci., Vol. 60, Issue 4, 182-9. McCrae, C., Rowe, M., Dautovich, N., Lichstein, K., Durrence, H., Riedel, B., Taylor, D., Bush, A., 2006, "Sleep hygiene practices in two community dwelling samples of older adults," Sleep, Vol. 29, Issue 12, 1551-60. McCrae, C., Ross, A., Stripling, A., Dautovich, N., 2007, "Eszopiclone for late-life insomnia," Clin. Interv. Aging, Vol. 2, Issue 3, 313-26, PMID: PMC2685268. Dautovich, N., McCrae, C., Rowe, M., 2008, "The association between napping and nocturnal sleep in a sample of community-dwelling older adults," J. Am. Geriatr. Soc., Vol. 56, Issue 9, 1681-6. Dzierzewski, J., Williams, J., Roditi, D., Marsiske, M., McCoy, K., McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMID: PMC2924958. Dautovich, N., Kay, D., Perlis, M., Dzierzewski, J., Rowe, M., McCrae, C., 2012, "Day-to-day Variability in Nap Duration Predicts Medical Morbidity in Older Adults," Health Psych.
McCrae, C.	Past	*McNamara, J. (2006-2008)	McCrae, C., Rowe, M., Tierney, C., Dautovich, N., Definis, A., McNamara, J., 2005, "Subjective and objective sleep patterns, sleep complaints, subjective and objective sleep patterns, health, psychological adjustment, and daytime functioning in community-dwelling older adults," J. Gerontol. B. Psychol. Sci. Soc. Sci., Vol. 60, Issue 4, 182-9. McCrae, C., Tierney, C., McNamara, J., 2005, "Behavioral intervention for insomnia: Future directions for nontraditional caregivers at various stages of care," Clin. Ger., Vol. 29, Issue 2, 95-115. McCrae, C., McNamara, J., Rowe, M., Dzierzewski, J., Dirk, J., Marsiske, M., Craggs, J., 2008, "Sleep and affect in older adults: using multilevel modeling to examine daily associations," J. Sleep Res., Vol. 17, Issue 1, 42-53, PMID: PMC2923492. Dzierzewski, J., Williams, J., Roditi, D., Marsiske, M., McCoy, K., McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMID: PMC2924958.

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McCrae, C.	Current	*Dzierzewski, J. (2006-)	McCrae, C., McNamara, J., Rowe, M., Dzierzewski, J. , Dirk, J., Marsiske, M., Craggs, J., 2008, "Sleep and affect in older adults: using multilevel modeling to examine daily associations," J. Sleep Res., Vol. 17, Issue 1, 42-53, PMID: PMC2923492. Dzierzewski, J. , O'Brien, E., Kay, D., McCrae, C., 2010, "Tackling sleeplessness: psychological treatment options for insomnia in older adults," Nat. Sci. Sleep, Vol. 2, 47-61, PMID: PMC3273867. Dzierzewski, J. , Williams, J., Roditi, D., Marsiske, M., McCoy, K., McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMID: PMC2924958. Aiken Morgan, A., Marsiske, M., Dzierzewski, J. , Jones, R., Whitfield, K., Johnson, K., Cresci, M., 2010, "Race-related cognitive test bias in the active study: a mimic model approach," Exp. Aging Res., Vol. 36, Issue 4, 426-52, PMID: PMC2941916. Dautovich, N., Kay, D., Perlis, M., Dzierzewski, J. , Rowe, M., McCrae, C., 2012, "Day-to-day Variability in Nap Duration Predicts Medical Morbidity in Older Adults," Health Psych. Kay, D., Dzierzewski, J. , Rowe, M., McCrae, C., 2012, "Greater night-to-night variability in sleep discrepancy among older adults with a sleep complaint compared to noncomplaining older adults," Behav. Sleep Med., Vol. 10, 1-15. McCrae, C., Vathauer, K., Dzierzewski, J. , Marsiske, M., 2012, "Habitual sleep, reasoning, and processing speed in older adults with sleep complaints," Cog. Therapy Res., Vol. 36, Issue 2, 156-164.
McCrae, C.	Current	*Williams, J. (2008-)	Dzierzewski, J., Williams, J. , Roditi, D., Marsiske, M., McCoy, K., McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMID: PMC2924958.
McCrae, C.	Current	*Roth, A. (2011-)	No Publications
McCrae, C.	Current	*Vathauer, K. (2011-)	McCrae, C., Vathauer, K. , Dzierzewski, J., Marsiske, M., 2012, "Habitual sleep, reasoning, and processing speed in older adults with sleep complaints," Cog. Therapy Res., Vol. 36, Issue 2, 156-164.
Nayfield, S.	Past	None	
Neff, D.	Past	Greenblum, C. (2006-2010)	Rowe, M., Vandever, S., Greenblum, C. , List, C., Fernandez, R., Mixson, N., Ahn, H., 2011, "Persons with dementia missing in the community: is it wandering or something unique?" BMC Geriatr., Vol. 11, 28, PMID: PMC3141319.
Neff, D.	Current	Arvidson, M. (2002-)	No Publications
Neff, D.	Current	Heusinger, A. (2007-)	Neff, D., Cimiotti, J., Heusinger, A. , Aiken, L., 2011, "Nurse reports from the frontlines: analysis of a statewide nurse survey," Nurs. Forum, Vol. 46, Issue 1, 4-10, PMID: PMC3117634.
Pahor, M.	Past	None	

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Perlstein, W.	Past	Demery, J. (2000-2004)	Demery, J., Pedraza, O., Hanlon, R., 2002, "Differential profiles of verbal learning in traumatic brain injury," J. Clin. Exp. Neuropsych., Vol. 24, Issue 6, 818-27. Perlstein, W., Cole, M., Demery, J., Seignourel, P., Dixit, N., Larson, M., Briggs, R., 2004, "Parametric manipulation of working memory load in traumatic brain injury: behavioral and neural correlates," J. Int. Neuropsych. Soc., Vol. 10, Issue 5, 724-41. Belanger, H., Curtiss, G., Demery, J., Lebowitz, B., Vanderploeg, R., 2005, "Factors moderating neuropsychological outcomes following mild traumatic brain injury: a meta-analysis," J. Int. Neuropsych. Soc., Vol. 11, Issue 3, 215-27. Seignourel, P., Robins, D., Larson, M., Demery, J., Cole, M., Perlstein, W., 2005, "Cognitive control in closed head injury: context matintenance dysfunction or prepotent response inhibition deficit?" Neuropsych., Vol. 19, Issue 5, 578-90. Larson, M., Perlstein, W., Demery, J., Stigge-Kaufman, D., 2006, "Cognitive control impairments in traumatic brain injury," J. Clin. Exp. Neuropsych., Vol. 28, Issue 6, 968-86. Pineda, J., Lewis, S., Valadka, A., Papa, L., Hannay, H., Heaton, S., Demery, J., Liu, M., Aikman, J., Akle, V., Brophy, G., Tepas, J., Wang, K., Robertson, C., Hayes, R., 2007, "Clinical significance of alphaspectrin breakdown products in cerebrospinal fluid after severe traumatic brain injury," J. Neurotrauma, Vol. 24, Issue 2, 354-66. Brophy, G., Pineda, J., Papa, L., Lewis, S., Valadka, A., Hannay, H., Heaton, S., Demery, J., Liu, M., Tepas, J., Gabrielli, A., Robicsek, S., Wang, K., Robertson, C., Hayes, R., 2009, "Alphaspectrin breakdown product cerebrospinal fluid exposure metrics suggest differences in cellular injury mechanisms after severe traumatic brain injury," J. Neurotrauma, Vol. 26, Issue 4, 471-9, PMID: PMC2848834. Giuffrida, C., Demery, J., Reyes, L., Lebowitz, B., Hanlon, R., 2009, "Functional skill learning in men with traumatic brain injury," Am. J. Occup. Ther., Vol. 63, Issue 4, 398-407. Papa, L., Akinyi, L., Liu, M., Pineda, J., Tepas, J., Oli, M., Zheng, W., Robinson, G., Robicsek, S., Gabrielli, A., Heaton, S., Hannay, H., Demery, J., Brophy, G., Layon, J., Robertson, C., Hayes, R., Wang, K., 2010, "Ubiquitin C-terminal hydrolase is a novel biomarker in humans for severe traumatic brain injury," Crit. Care Med., Vol. 38, Issue 1, 138-44. Demery, J., Larson, M., Dixit, N., Bauer, R., Perlstein, W., 2010, "Operating characteristics of executive functioning tests following traumatic brain injury," Clin. Neuropsych., Vol. 24, Issue 8, 1292-308.
Perlstein, W.	Past	Cole, M. (2000-2005)	Perlstein, W., Cole, M., Larson, M., Kelly, K., Seignourel, P., Keil, A., "Steady-state visual evoked potentials reveal frontally-mediated working memory activity in humans," Neurosci. Lett., Vol. 342, Issue 3, 191-5. Perlstein, W., Cole, M., Demery, J., Seignourel, P., Dixit, N., Larson, M., Briggs, R., 2004, "Parametric manipulation of working memory load in traumatic brain injury: behavioral and neural correlates," J. Int. Neuropsych. Soc., Vol. 10, Issue 5, 724-41. Seignourel, P., Robins, D., Larson, M., Demery, J., Cole, M., Perlstein, W., 2005, "Cognitive control in closed head injury: context matintenance dysfunction or prepotent response inhibition deficit?" Neuropsych., Vol. 19, Issue 5, 578-90.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Perlstein, W.	Past	Dixit, N. (2001-2006)	Perlstein, W., Dixit, N., Carter, C., Noll, D., Cohen, J., 2003, "Prefrontal cortex dysfunction mediates deficits in working memory and prepotent responding in schizophrenia," Biol. Psych., Vol. 53, Issue 1, 25-38. Perlstein, W., Cole, M., Demery, J., Seignourel, P., Dixit, N., Larson, M., Briggs, R., 2004, "Parametric manipulation of working memory load in traumatic brain injury: behavioral and neural correlates," J. Int. Neuropsych. Soc., Vol. 10, Issue 5, 724-41. Kuhl, E., Dixit, N., Walker, R., Conti, J., Sears, S., 2006, "Measurement of patient fears about implantable cardioverter defibrillator shock: an initial evaluation of the florida Shock Anxiety Scale," Pacing Clin. Electrophys., Vol. 29, Issue 6, 614-8. Dixit, N., Vazquez, L., Cross, N., Kuhl, E., Serber, E., Kovacs, A., Dede, D., Conti, J., Sears, S., 2010, "Cardiac resynchronization therapy: a pilot study examining cognitive change in patients before and after treatment," Clin. Cardiol., Vol. 33, Issue 2, 84-8. Demery, J., Larson, M., Dixit, N., Bauer, R., Perlstein, W., 2010, "Operating characteristics of executive functioning tests following traumatic brain injury," Clin. Neuropsych., Vol. 24, Issue 8, 1292-308.
Perlstein, W.	Past	Larson, M. (2002-2008)	Perlstein, W., Cole, M., Larson, M., Kelly, K., Seignourel, P., Keil, A., "Steady-state visual evoked potentials reveal frontally-mediated working memory activity in humans," Neurosci. Lett., Vol. 342, Issue 3, 191-5. Perlstein, W., Cole, M., Demery, J., Seignourel, P., Dixit, N., Larson, M., Briggs, R., 2004, "Parametric manipulation of working memory load in traumatic brain injury: behavioral and neural correlates," J. Int. Neuropsych. Soc., Vol. 10, Issue 5, 724-41. Seignourel, P., Robins, D., Larson, M., Demery, J., Cole, M., Perlstein, W., 2005, "Cognitive control in closed head injury: context maintenance dysfunction or prepotent response inhibition deficit?" Neuropsych., Vol. 19, Issue 5, 578-90. Larson, M., Perlstein, W., Demery, J., Stigge-Kaufman, D., 2006, "Cognitive control impairments in traumatic brain injury," J. Clin. Exp. Neuropsych., Vol. 28, Issue 6, 968-86. Perlstein, W., Larson, M., Dotson, V., Kelly, K., 2006, "Temporal dissociation of components of cognitive control dysfunction in severe TBI: ERPs and the cued-Stroop task," Neuropsych., Vol. 44, Issue 2, 260-84. Demery, J., Larson, M., Dixit, N., Bauer, R., Perlstein, W., 2010, "Operating characteristics of executive functioning tests following traumatic brain injury," Clin. Neuropsych., Vol. 24, Issue 8, 1292-308.

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Perlstein, W.	Past	Dotson, V. (2002-2006)	Perlstein, W., Larson, M., Dotson, V., Kelly, K., 2006, "Temporal dissociation of components of cognitive control dysfunction in severe TBI: ERPs and the cued-Stroop task," <i>Neuropsych.</i>, Vol. 44, Issue 2, 260-84. Larson, M., Perlstein, W., Stigge-Kaufman, D., Kelly, K., Dotson, V., 2006, "Affective context-induced modulation of the error-related negativity," <i>Neuroreport</i>, Vol. 17, Issue 3, 329-33. Dotson, V., Singletary, F., Fuller, R., Koehler, S., Moore, A., Gonzalez-Rothi, L., Crosson, B., 2007, "Treatment of word-finding deficits in fluent aphasia through the manipulation of spatial attention: preliminary findings," <i>Aphasiology</i>, Vol. 22, Issue 1, 103-113, PMCID: PMC3225083. Dotson, V., Schinka, J., Brown, L., Mortimer, J., Borenstein, A., 2008, "Characteristics of the Florida cognitive activities scale in older African Americans," <i>Assess.</i>, Vol. 15, Issue 1, 72-7. Dotson, V., Resnick, S., Zonderman, A., 2008, "Differential association of concurrent, baseline, and average depressive symptoms with cognitive decline in older adults," <i>Am. J. Geriatr. Psych.</i>, Vol. 16, Issue 4, 318-30, PMCID: PMC2405887. Dotson, V., Kitner-Triolo, M., Evans, M., Zonderman, A., 2008, "Literacy-based normative data for low socioeconomic status African Americans," <i>Clin. Neuropsych.</i>, Vol. 22, Issue 6, 989-1017. Dotson, V., Beason-Held, L., Kraut, M., Resnick, S., 2009, "Longitudinal study of chronic depressive symptoms and regional cerebral blood flow in older men and women," <i>Int. J. Geriatr. Psych.</i>, Vol. 24, Issue 8, 809-19, PMCID: PMC2744107. Dotson, V., Kitner-Triolo, M., Evans, M., Zonderman, A., 2009, "Effects of race and socioeconomic status on the relative influence of education and literacy on cognitive functioning," <i>J. Int. Neuropsych. Soc.</i>, Vol. 15, Issue 4, 580-9, PMCID: PMC2722437. Dotson, V., Davatzikos, C., Kraut, M., Resnick, S., 2009, "Depressive symptoms and brain volumes in older adults: a longitudinal magnetic resonance imaging study," <i>J. Psych. Neurosci.</i>, Vol. 34, Issue 5, 367-75, PMCID: PMC2732743. Pedraza, O., Dotson, V., Willis, F., Graff-Radford, N., Lucas, J., 2009, "Internal consistency and test-retest stability of the geriatric depression scale-short form in African American older adults," <i>J. Psych. Behav. Assess.</i>, Vol. 31, Issue 4, 412-6, PMCID: PMC2794552. Dotson, V., Zonderman, A., Davatzikos, C., Kraut, M., Resnick, S., 2009, "Frontal atrophy and attention deficits in older adults with a history of elevated depressive symptoms," <i>Brain Imaging Behav.</i>, Vol. 3, Issue 4, 358, PMCID: PMC2818329. Sutin, A., Beason-Held, L., Dotson, V., Resnick, S., Costa, P., 2010, "The neural correlates of Neuroticism differ by sex prospectively mediate depressive symptoms among older women," <i>J. Affect. Disord.</i>, Vol. 127, Issue 1-3, 241-7, PMCID: PMC3023236. Dotson, V., Beydoun, M., Zonderman, A., 2010, "Recurrent depressive symptoms and the incidence of dementia and mild cognitive impairment," <i>Neurology</i>, Vol. 75, Issue 1, 27-34, PMCID: PMC2906403. Goveas, J., Espeland, M., Hogan, P., Dotson, V., Tarima, S., Coker, L., Ockene, J., Brunner, R., Woods, N., Wassertheil-Smoller, S., Kotchen, J., Resnick, S., 2011, "Depressive symptoms, brain volumes and subclinical cerebrovascular disease in postmenopausal women: the women's health initiative MRI study," <i>J. Affect. Disord.</i>, Vol. 132, Issue 1-2, 275-84.

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Perlstein, W.	Past	Kaufman, D. (2003-2009)	Howe, L., Anderson, A., Kaufman, D. , Sachs, B., Loring, D., 2007, "Characterization of the Medical Symptom Validity Test in evaluation of clinically referred memory disorders in clinic patients," Arch. Clin. Neuropsychol., Vol. 22, Issue 6, 753-61. Storch, E., Kaufman, D. , Bagner, D., Merlo, L., Shapira, N., Geffken, G., Murphy, T., Goodman, W., 2007, "Florida Obsessive-Compulsive Inventory: development, reliability, and validity," J. Clin. Psychol., Vol. 63, Issue 9, 851-9. Larson, M., Kaufman, D. , Schmalfuss, I., Perlstein, W., 2007, "Performance monitoring, error processing, and evaluative control following severe TBI," J. Int. Neuropsychol. Soc., Vol. 13, Issue 6, 961-71. Sozda, C., Larson, M., Kaufman, D. , Schmalfuss, I., Perlstein, W., 2011, "Error-related processing following severe traumatic brain injury: an event-related functional magnetic resonance imaging (fMRI) study," Int. J. Psychophysiol., Vol. 82, Issue 1, 97-106.
Perlstein, W.	Past	Kellison, I. (2004-2010)	Howe, L., Kellison, I. , Fernandez, H., Okun, M., Bowers, D., 2009, "Neuropsychological profile of a Filipino gentleman with X-linked dystonia-parkinsonism: a case report of Lubag disease," Clin. Neuropsychol., Vol. 23, Issue 1, 100-17. Mikos, A., Springer, U., Nisenzon, A., Kellison, I. , Fernandez, H., Okun, M., Bowers, D., 2009, "Awareness of expressivity deficits in non-demented Parkinson disease," Clin. Neuropsychol., Vol. 23, Issue 5, 805-17.
Perlstein, W.	Current	*Sozda, C. (2007-)	Sozda, C. , Larson, M., Kaufman, D., Schmalfuss, I., Perlstein, W., 2011, "Error-related processing following severe traumatic brain injury: an event-related functional magnetic resonance imaging (fMRI) study," Int. J. Psychophysiol., Vol. 82, Issue 1, 97-106.
Perlstein, W.	Current	*Gravano, J. (2010-)	No Publications
Perlstein, W.	Current	*Hill-Jarrett, T. (2011-)	No Publications
Perri, M.	Past	Newton, R. (1995-2002)	Perri, M., Anton, S., Durning, P., Ketterson, T., Sydemann, S., Berlant, N., Kanasky, W., Newton, R. , Limacher, M., Martin, A., 2002, "Adherence to exercise prescriptions: effects of prescribing moderate versus higher levels of intensity and frequency," Health Psych., Vol. 21, Issue 5, 452-8. Duncan, G., Anton, S., Newton, R. , Perri, M., 2003, "Comparison of perceived health to physiological measures of health in Black and White women," Prev. Med., Vol. 36, Issue 5, 624-8. Newton, R. , Perri, M., 2004, "A randomized pilot trial of exercise promotion in sedentary African-American adults," Ethn. Dis., Vol. 14, Issue 4, 548-57. Duncan, G., Anton, S., Sydemann, S., Newton, R. , Corsica, J., Durning, P., Ketterson, T., Martin, A., Limacher, M., Perri, M., 2005, "Prescribing exercise at varied levels of intensity and frequency: a randomized trial," Arch. Intern. Med., Vol. 165, Issue 20, 2362-9.

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Perri, M.	Past	Anton, S. (1997-2003)	Kanasky, W., Anton, S., Rodrigue, J., Perri, M., Szwed, T., Baz, M., 2002, "Impact of body weight on long-term survival after lung transplantation," <i>Chest.</i>, Vol. 121, Issue 2, 401-6. Perri, M., Anton, S., Durning, P., Ketterson, T., Sydeman, S., Berlant, N., Kanasky, W., Newton, R., Limacher, M., Martin, A., 2002, "Adherence to exercise prescriptions: effects of prescribing moderate versus higher levels of intensity and frequency," <i>Health Psych.</i>, Vol. 21, Issue 5, 452-8. Duncan, G., Anton, S., Newton, R., Perri, M., 2003, "Comparison of perceived health to physiological measures of health in Black and White women," <i>Prev. Med.</i>, Vol. 36, Issue 5, 624-8. Duncan, G., Perri, M., Anton, S., Limacher, M., Martin, A., Lowenthal, D., Arning, E., Bottiglieri, T., Stacpoole, P., 2004, "Effects of exercise on emerging and traditional cardiovascular risk factors," <i>Prev. Med.</i>, Vol. 39, Issue 5, 894-902. Heilbronn, L., Smith, S., Martin, C., Anton, S., Ravussin, E., 2005, "Alternate-day fasting in non-obese subjects: effects on body weight, body composition, and energy metabolism," <i>Am. J. Clin. Nutr.</i>, Vol. 81, Issue 1, 69-73. Anton, S., Miller, P., 2005, "Do negative emotions predict alcohol consumption, saturated fat intake, and physical activity in older adults?" <i>Behav. Modif.</i>, Vol. 29, Issue 4, 677-88. Duncan, G., Anton, S., Sydeman, S., Newton, R., Corsica, J., Durning, P., Ketterson, T., Martin, A., Limacher, M., Perri, M., 2005, "Prescribing exercise at varied levels of intensity and frequency: a randomized trial," <i>Arch. Intern. Med.</i>, Vol. 165, Issue 20, 2362-9. Shechtman, O., Anton, S., Kanasky, W., Robinson, M., 2006, "The use of the coefficient of variation in detecting sincerity of effort: a meta-analysis," <i>Work.</i>, Vol. 26, Issue 4, 335-41. Martin, C., Newton, R., Anton, S., Allen, H., Alfonso, A., Han, H., Stewart, T., Sothorn, M., Williamson, D., 2007, "Measurement of children's food intake with digital photography and the effects of second servings upon food intake," <i>Eat Behav.</i>, Vol. 8, Issue 2, 148-56. Manini, T., Newman, A., Fielding, R., Blair, S., Perri, M., Anton, S., Goodpaster, B., Katula, J., Rejeski, W., Kritchevsky, S., Hsu, F., Pahor, M., King, A., LIFE Research Group, 2010, "Effects of exercise on mobility in obese and nonobese older adults," <i>Obesity</i>, Vol. 18, Issue 6, 1168-75, PMID: PMC3114403. Wohlgemuth, S., Lees, H., Marzetti, E., Manini, T., Aranda, J., Daniels, M., Pahor, M., Perri, M., Leeuwenburgh, C., Anton, S., 2011, "An exploratory analysis of the effects of a weight loss plus exercise program on cellular quality control mechanisms in older overweight women," <i>Rejuvenation Res.</i>, Vol. 14, Issue 3, 315-24. Anton, S., Duncan, G., Limacher, M., Martin, A., Perri, M., 2011, "How much walking is needed to improve cardiorespiratory fitness? An examination of the 2008 Physical Activity Guidelines for Americans," <i>Res. Q. Exerc. Sport</i>, Vol. 82, Issue 2, 365-70. Anton, S., Manini, T., Milsom, V., Dubyak, P., Cesari, M., Cheng, J., Daniels, M., Marsiske, M., Pahor, M., Leeuwenburgh, C., Perri, M., 2011, "Effects of a weight loss plus exercise program on physical function in overweight, older women: a randomized controlled trial," <i>Clin. Interv. Aging</i>, Vol. 6, 141-9, PMID: PMC3131984. Nocera, J., Buford, T., Manini, T., Naugle, K., Leeuwenburgh, C., Pahor, M., Perri, M., Anton, S., 2011, "The impact of behavioral intervention on obesity mediated declines in mobility function: implications for longevity," PMID: PMC3195552.

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Perri, M.	Past	Kanasky, W. (1998-2003)	Kanasky, W., Anton, S., Rodrigue, J., Perri, M., Szwed, T., Baz, M., 2002, "Impact of body weight on long-term survival after lung transplantation," Chest., Vol. 121, Issue 2, 401-6. Perri, M., Anton, S., Durning, P., Ketterson, T., Sydemann, S., Berlant, N., Kanasky, W., Newton, R., Limacher, M., Martin, A., 2002, "Adherence to exercise prescriptions: effects of prescribing moderate versus higher levels of intensity and frequency," Health Psych., Vol. 21, Issue 5, 452-8. Rodrigue, J., Baz, M., Kanasky, W., MacNaughton, K., 2005, "Does lung transplantation improve health-related quality of life? The University of Florida experience," J. Heart Lung Transplant, Vol. 24, Issue 6, 755-63. Shechtman, O., Anton, S., Kanasky, W., Robinson, M., 2006, "The use of the coefficient of variation in detecting sincerity of effort: a meta-analysis," Work., Vol. 26, Issue 4, 335-41.
Perri, M.	Past	Berlant, N. (1998-2004)	Perri, M., Anton, S., Durning, P., Ketterson, T., Sydemann, S., Berlant, N., Kanasky, W., Newton, R., Limacher, M., Martin, A., 2002, "Adherence to exercise prescriptions: effects of prescribing moderate versus higher levels of intensity and frequency," Health Psych., Vol. 21, Issue 5, 452-8.
Perri, M.	Past	Ames, G. (2000-2005)	Ames, G., Perri, M., Fox, L., Fallon, E., DeBraganza, N., Murawski, M., Pafumi, L., Hausenblas, H., 2005, "Changing weight-loss expectations: a randomized pilot study," Eat Behav., Vol. 6, Issue 3, 259-69. Ames, S., Tan, W., Ames, G., Stone, R., Rizzo, T., Heckman, M., Crook, J., Clark, M., Rummans, T., Werch, C., 2008, "Quality of life of men with biochemical recurrence of prostate cancer," J. Psychosoc. Oncol., Vol. 26, Issue 2, 17-34. Ames, S., Ames, G., Stevens, S., Patten, C., Werch, C., Schroeder, D., 2008, "Effect of expressive writing as a treatment adjunct for reducing smoking cessation related weight gain in young adult smokers," Subst. Use Misuse, Vol. 43, Issue 10, 1315-25. Ames, S., Werch, C., Ames, G., Lange, L., Schroeder, D., Hanson, A., Patten, C., 2010, "Integrated smoking cessation and binge drinking intervention for young adults: a pilot investigation," Ann. Behav. Med., Vol. 40, Issue 3, 343-9, PMID: PMC3035986. Ames, S., Tan, W., Ames, G., Stone, R., Rizzo, T., Crook, J., Williams, C., Werch, C., Clark, M., Rummans, T., 2011, "A pilot investigation of a multidisciplinary quality of life intervention for men with biochemical recurrence of prostate cancer," Psychooncology, Vol. 20, Issue 4, 435-40. Ames, S., Parker, A., Crook, J., Diehl, N., Tan, W., Williams, C., Ames, G., 2011, "Quality of life of patients undergoing surgical treatment for newly-diagnosed, clinically localized renal cell carcinoma," J. Psychosoc. Oncol., Vol. 29, Issue 6, 593-605. Goldberg, R., Parker, M., Stauffer, J., Moti, S., Sylvia, J., Ames, G., Asbun, H., Lynch, S., Smith, C., Bowers, S., 2012, "Surgeon's requirement for obesity reduction: its influence on weight loss," Am. Surg., Vol. 78, Issue 3, 325-8.
Perri, M.	Past	Murawski, M. (2002-2007)	Ames, G., Perri, M., Fox, L., Fallon, E., DeBraganza, N., Murawski, M., Pafumi, L., Hausenblas, H., 2005, "Changing weight-loss expectations: a randomized pilot study," Eat Behav., Vol. 6, Issue 3, 259-69. Ross, K., Milsom, V., Rickel, K., Debraganza, N., Gibbons, L., Murawski, M., Perri, M., 2009, "The contributions of weight loss and increased physical fitness to improvements in health-related quality of life," Eat Behav., Vol. 10, Issue 2, 84-8, PMID: PMC2720563. Murawski, M., Milsom, V., Ross, K., Rickel, K., DeBraganza, N., Gibbons, L., Perri, M., 2009, "Problem solving, treatment adherence, and weight-loss outcome among women participating in lifestyle treatment for obesity," Eat Behav., Vol. 10, Issue 3, 146-51, PMID: PMC2726832.

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Perri, M.	Past	Rickel, K. (2003-2008)	Ross, K., Milsom, V., Rickel, K. , Debraganza, N., Gibbons, L., Murawski, M., Perri, M., 2009, "The contributions of weight loss and increased physical fitness to improvements in health-related quality of life," Eat Behav., Vol. 10, Issue 2, 84-8, PMID: PMC2720563. Murawski, M., Milsom, V., Ross, K., Rickel, K. , DeBraganza, N., Gibbons, L., Perri, M., 2009, "Problem solving, treatment adherence, and weight-loss outcome among women participating in lifestyle treatment for obesity," Eat Behav., Vol. 10, Issue 3, 146-51, PMID: PMC2726832. Rickel, K. , Milsom, V., Ross, K., Hoover, V., Peterson, N., Perri, M., 2011, "Differential response of African American and Caucasian women to extended-care programs for obesity management," Ethn. Dis., Vol. 21, Issue 2, 170-5.
Perri, M.	Past	DeBraganza, N. (2004-2010)	Storch, E., Milsom, V., DeBraganza, N. , Lewin, A., Geffken, G., Silverstein, J., 2007, "Peer victimization, psychosocial adjustment, and physical activity in overweight and at-risk-for-overweight youth," J. Pediatr. Psychol., Vol. 32, Issue 1, 80-9. Ross, K., Milsom, V., Rickel, K., DeBraganza, N. , Gibbons, L., Murawski, M., Perri, M., 2009, "The contributions of weight loss and increased physical fitness to improvements in health-related quality of life," Eat Behav., Vol. 10, Issue 2, 84-8, PMID: PMC2720563. Murawski, M., Milsom, V., Ross, K., Rickel, K., DeBraganza, N. , Gibbons, L., Perri, M., 2009, "Problem solving, treatment adherence, and weight-loss outcome among women participating in lifestyle treatment for obesity," Eat Behav., Vol. 10, Issue 3, 146-51, PMID: PMC2726832.
Perri, M.	Past	Milsom, V. (2004-2010)	Storch, E., Milsom, V. , DeBraganza, N., Lewin, A., Geffken, G., Silverstein, J., 2007, "Peer victimization, psychosocial adjustment, and physical activity in overweight and at-risk-for-overweight youth," J. Pediatr. Psychol., Vol. 32, Issue 1, 80-9. Storch, E., Merlo, L., Lack, C., Milsom, V. , Geffken, G., Goodman, W., Murphy, T., 2007, "Quality of life in youth with Tourette's syndrome and chronic tic disorder," J. Clin. Child Adolesc. Psychol., Vol. 36, Issue 2, 217-27. Storch, E., Milsom, V. , Merlo, L., Larson, M., Geffken, G., Jacob, M., Murphy, T., Goodman, W., 2008, "Insight in pediatric obsessive-compulsive disorder: associations with clinical presentation," Psychiatry Res., Vol. 160, Issue 2, 212-20. Ross, K., Milsom, V. , Rickel, K., Debraganza, N., Gibbons, L., Murawski, M., Perri, M., 2009, "The contributions of weight loss and increased physical fitness to improvements in health-related quality of life," Eat Behav., Vol. 10, Issue 2, 84-8, PMID: PMC2720563. Murawski, M., Milsom, V. , Ross, K., Rickel, K., DeBraganza, N., Gibbons, L., Perri, M., 2009, "Problem solving, treatment adherence, and weight-loss outcome among women participating in lifestyle treatment for obesity," Eat Behav., Vol. 10, Issue 3, 146-51, PMID: PMC2726832. Rickel, K., Milsom, V. , Ross, K., Hoover, V., Peterson, N., Perri, M., 2011, "Differential response of African American and Caucasian women to extended-care programs for obesity management," Ethn. Dis., Vol. 21, Issue 2, 170-5. Anton, S., Manini, T., Milsom, V. , Dubyak, P., Cesari, M., Cheng, J., Daniels, M., Marsiske, M., Pahor, M., Leeuwenburgh, C., Perri, M., 2011, "Effects of a weight loss plus exercise program on physical function in overweight, older women: a randomized controlled trial," Clin. Interv. Aging, Vol. 6, 141-9, PMID: PMC3131984.
Perri, M.	Current	Andre, R. (2005-)	No Publications

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Perri, M.	Current	*Dubyak, P. (2006-)	Anton, S., Manini, T., Milsom, V., Dubyak, P. , Cesari, M., Cheng, J., Daniels, M., Marsiske, M., Pahor, M., Leeuwenburgh, C., Perri, M., 2011, "Effects of a weight loss plus exercise program on physical function in overweight, older women: a randomized controlled trial," Clin. Interv. Aging, Vol. 6, 141-9, PMID: PMC3131984.
Perri, M.	Current	*Nackers, L. (2006-)	Nackers, L. , Ross, K., Perri, M., 2010, "The association between rate of initial weight loss and long-term success in obesity treatment: does slow and steady win the race?" Int. J. Behav. Med., Vol. 17, Issue 3, 161-7.
Perri, M.	Current	*Ross, K. (2007-)	Ross, K. , Milsom, V., Rickel, K., Debraganza, N., Gibbons, L., Murawski, M., Perri, M., 2009, "The contributions of weight loss and increased physical fitness to improvements in health-related quality of life," Eat Behav., Vol. 10, Issue 2, 84-8, PMID: PMC2720563. Murawski, M., Milsom, V., Ross, K. , Rickel, K., DeBraganza, N., Gibbons, L., Perri, M., 2009, "Problem solving, treatment adherence, and weight-loss outcome among women participating in lifestyle treatment for obesity," Eat Behav., Vol. 10, Issue 3, 146-51, PMID: PMC2726832. Nackers, L., Ross, K. , Perri, M., 2010, "The association between rate of initial weight loss and long-term success in obesity treatment: does slow and steady win the race?" Int. J. Behav. Med., Vol. 17, Issue 3, 161-7. Rickel, K., Milsom, V., Ross, K. , Hoover, V., Peterson, N., Perri, M., 2011, "Differential response of African American and Caucasian women to extended-care programs for obesity management," Ethn. Dis., Vol. 21, Issue 2, 170-5.
Perri, M.	Current	*Hoover, V. (2008-)	Rickel, K., Milsom, V., Ross, K., Hoover, V. , Peterson, N., Perri, M., 2011, "Differential response of African American and Caucasian women to extended-care programs for obesity management," Ethn. Dis., Vol. 21, Issue 2, 170-5.
Perri, M.	Current	*Newell, K. (2009-)	No Publications
Perri, M.	Current	*Lepinasse, D. (2010-)	No Publications
Perri, M.	Current	*Maurer, S. (2010-)	No Publications
Perri, M.	Current	*Minski, S. (2010-)	No Publications
Perri, M.	Current	Al Abduljabbar, M. (2011-)	No Publications
Perri, M.	Current	Karabetian, C. (2011-)	No Publications

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Price, C.	Past	* Mitchell, S. (2005-2011)	Mitchell, S., Price, C., Tanner, J., Towler, S., Mahfood, D., Libon, D., Heilman, K., 2009, "The relationship between regional leukoariosis, brainstructure, and cognition in dementia," J. Int'l. Neuropsych. Soc., Issue 12, 213. Mitchell, S., Price, C., Tanner, J., Nguyen, P., Ward, J., Libon, D., Okun, M., 2011, "Verbal Fluency and Performance Over Time in Idiopathic Parkinson's Disease," Final Program, Thirty-Ninth Annual Meeting International Neuropsychological Society, J. Int'l. Neuropsych. Soc., 334. Price, C., Mitchell, S., Brumback, B., Tanner, J., Schmalfuss, I., Lamar, M., Giovannetti, T., Heilman, K., Libon, D., (in press), "The leukoariosis (LA) 25% threshold and the phenotypic expression of dementia," Neurology.
Price, C.	Current	*Tanner, J. (2006-)	Price, C., Garrett, K., Jefferson, A., Cosentino, S., Tanner, J., Penney, D., Swenson, R., Giovannetti, T., Bettcher, B., Libon, D., 2009, "Leukoariosis severity and list-learning in dementia," Clin. Neuropsychol., Vol. 23, Issue 6, 944-61, PMID: PMC2866111. Price, C., Favilla, C., Tanner, J., Twoler, S., Jacobson, C., Hass, C., Foote, K., Okun, M., 2011, "Lateral ventricle volume is poor predictor of post unilateral DBS motor change for Parkinson's disease," Parkinsonism Relat. Disord., Vol. 17, Issue 5, 343-7. Price, C., Mitchell, S., Brumback, B., Tanner, J., Schmalfuss, I., Lamar, M., Giovannetti, T., Heilman, K., Libon, D., (in press), "The leukoariosis (LA) 25% threshold and the phenotypic expression of dementia," Neurology. Tanner, J., Price, C., Nguyen, P., Triplett, W., Okun, M., Fernandez, H., Mareci, T., 2011, "Examining A Case of Hemiatrophy with Parkinsonism Using Neuropsychology and Diffusion Imaging Approaches," J. Int'l. Neuropsych. Soc., Vol. 17, 334. Tanner, J., O'Sullivan, K., Nguyen, P., Triplett, W., Mareci, T., Price, C., 2012, "Reliability of Automated Versus Manual Regions of Interest: Implications for Fiber Tracking," J. Int'l. Neuropsych. Soc., Vol. 18, 226. Tanner, J., Price, C., Malaty, I., Okun, M., Libon, D., Bowers, D., 2012, "Verbal Learning Profiles and Entorhinal Cortex Volume in Parkinson's Disease," J. Int'l. Neuropsych. Soc., Vol. 18, 17.
Price, C.	Current	* Cohen, M. (2007-)	Cohen, M., Burtis, B., Kwon, J., Williamson, J., Heilman, K., 2010, "Action-intentional spatial bias in patient with posterior cortical atrophy," Neurocase., Vol. 16, Issue 6, 529-34. Cohen, M., Rozensky, R., Zlater, Z., Averbuch, R., Cibula, J., 2010, "Posttraumatic stress disorder caused by the misattribution of seizure-related experiential responses," Vol. 19, Issue 4, 652-5, PMID: PMC3074434. Cohen, M., Heaton, S., Ginn, N., Eyberg, S., "Parent-child interaction therapy as a family-oriented approach to behavioral management following pediatric brain injury: a case report," J. Pediatr. Psych., Vol. 37, Issue 3, 251-61.
Price, C.	Current	*Nguyen, P. (2009-)	Nguyen, P., Tanner, J., Schwab, N., Ward, J., Hwynn, N., Okun, M., Price, C., 2011, "Cortical and Sub-cortical Volumes in Cognitively Intact Right-onset Parkinson's Disease," J. Int'l. Neuropsych. Soc., Vol. 17, 334. Nguyen, P., Tanner, J., Triplett, W., Mareci, T., Price, C., 2012, "Reliability and Validity of Diffusion Imaging Methods Assessing Caudate to Frontal Lobe Function," J. Int'l. Neuropsych. Soc., Vol. 18, 225. Gullett, J., Price, C., Nguyen, P., Okun, M., Bauer, R., Bowers, D., 2012, "Reliability of a Benton JOLO Short Form in Parkinson's Disease," J. Int'l. Neuropsych. Soc., Vol. 17, 334.
Price, C.	Current	*Faust, M. (2011-)	Nguyen, P., Faust, M., O'Sullivan, K., Tanner, J., Price, C., 2012, "A Comparison of Three Dorsolateral Prefrontal Cortex Regions," J. Int'l. Neuropsych. Soc., Vol. 18, 225.

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Reilly, J.	Past	Rodriguez, A. (2004-2010)	Reilly, J., Rodriguez, A. , Lamy, M., Neils-Strunjas, J., 2010, "Cognition, language, and clinical pathological features of non-Alzheimer's dementias: an overview," J. Commun. Disord., Vol. 43, Issue 5, 438-52, PMCID: PMC2922444. Reilly, J., Rodriguez, A. , Peelle, J., Grossman, M., 2011, "Frontal lobe damage impairs process and content in semantic memory: evidence from category-specific effects in progressive non-fluent aphasia," Cortex., Vol. 47, Issue 6, 645-58. Park, H., Rogalski, Y., Rodriguez, A. , Zlater, Z., Benjamin, M., Harnish, S., Bennett, J., Rosenbek, J., Crosson, B., Reilly, J., 2011, "Perceptual cues used by listeners to discriminate fluent from nonfluent narrative discourse," Aphasiology, Vol. 25, Issue 9, 998-1015, PMCID: PMC3239412.
Reilly, J.	Current	Troche, J. (2009-)	Troche, J. , Troche, M., Berkowitz, Grossman, M., Reilly, J., 2012, "Tone Discrimination as a Window into Acoustic Perceptual Deficits in Parkinson's Disease," Am. J. Speech Lang. Pathol.
Reilly, J.	Current	Park, H. (2009-)	No Publications
Reilly, J.	Current	Hung, C. (2010-)	No Publications
Roberts, B.	Current	Bennett, C. (2006-)	Georges, C., Bolton, L., Bennett, C. , 2003, "Quality of care in African-American communities and the nursing shortage," J. Natl. Black Nurses Assoc., Vol. 14, Issue 2, 16-24. Georgies, C., Bolton, L., Bennett, C. , 2004, "Functional health literacy: an issue in African-American and other ethnic and racial communities," J. Natl. Black Nurses Assoc., Vol. 15, Issue 1, 1-4. Bolton, L., Shihady, I., Bennett, C. , Broussard, P., Fridman, M., Fink, A., Fridman, R., Aydin, C., Korst, L., Gregory, K., 2005, "Engaging nurse leaders in health services research," J. Nurs. Adm., Vol. 35, Issue 5, 238-43. Bolton, L., Donaldson, N., Rutledge, N., Bennett, C. , Brown, D., 2007, "The impact of nursing interventions: overview of effective interventions, outcomes, measures, and priorities for future research," Med. Care Res. Rev., Vol. 64, Issue 2, 123-43.
Roberts, B.	Current	Burns, M. (2008-)	No Publications
Roberts, B.	Current	Reynolds, A. (2009-)	No Publications
Robinson, M.	Past	Campbell, L. (1997-2002)	No Publications

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Robinson, M.	Past	Papras, R. (1998-2004)	Riley, J., Wade, J., Myers, C., Sheffield, D., Papras, R., Price, D., 2002, "Racial/ethnic differences in the experience of chronic pain," Pain, Vol. 100, Issue 3, 291-8. Papras, R., Logan, H., Tomar, S., 2004, "Effectiveness of a community-based oral cancer awareness campaign (United States)," Cancer Causes Control, Vol. 15, Issue 2, 121-31. Haskell, S., Heapy, A., Reid, M., Papras, R., Kerns, R., 2006, "The prevalence and age-related characteristics of pain in a sample of women veterans receiving primary care," J. Women's Health, Vol. 15, Issue 7, 862-9. Papras, R., Sidle, J., Wamalwa, E., Okumu, T., Bryant, K., Goulet, J., Maisto, S., Braithwaite, R., Justice, A., 2010, "Estimating alcohol content of traditional brew in Western Kenya using culturally relevant methods: the case for cost over volume," AIDS Behav., Vol. 14, Issue 4, 836-44, PMCID: PMC2909349. Papras, R., Sidle, J., Martino, S., Baliddawa, J., Songole, R., Omolo, O., Gakinya, B., Mwaniki, M., Adina, J., Nafula, T., Owino-Ong'er, W., Bryant, K., Carroll, K., Goulet, J., Justice, A., Maisto, S., 2010, "Systematics cultural adaptation of cognitive-behavioral therapy to reduce alcohol use among HIV-infected outpatients in Western Kenya," AIDS, Behav., Vol. 14, Issue 3, 669-78, PMCID: PMC2949418. Papras, R., Sidle, J., Gakinya, B., Baliddawa, J., Martino, S., Mwaniki, M., Songole, R., Omolo, O., Kamanda, A., Ayuku, D., Ojwang, C., Owino-Ong'or, W., Harrington, M., Bryant, K., Carroll, K., Justice, A., Hogan, J., Maisto, S., 2011, "Treatment outcomes of a stage 1 cognitive-behavioral trial to reduce alcohol use among human immunodeficiency virus-infected outpatients in Western Kenya," Addiction, Vol. 106, Issue 12, 2156-66.
Robinson, M.	Past	Brown, J. (2001-2007)	Brown, J., Sheffield, D., Leary, M., Robinson, M., 2003, "Social support and experimental pain," Psych. Med., Vol. 65, 276-83. Brown, J., Edwards, P., Atchison, J., Lafayette-Lucey, A., Wittmer, V., Robinson, M., 2008, "Defining patient-centered, multidimensional success criteria for treatment of chronic spine pain," Pain Med., Vol. 9, 851-62.
Robinson, M.	Past	Jump, R. (2001-2005)	Jump, R., Richards, H., Kilbourn, K., Robinson, M., 2002, "Multifactorial causes of fatigue in SLE: Contributions of pain, depression and perceived social support," Arthr. Rheu. Vol. 46, S447-S. Robinson, M., Gagnon, C., Dannecker, E., Brown, J., Jump, R., Price, D., 2003, "Sex differences in common pain events: Expectations and anchors," J Pain, Vol. 4, 40-5. Jump, R., Armstrong, A., Santiago, B., Barnes, E., Narain, S., Robinson, M., et al, 2004, "Pain and fatigue are associated with increased C-reactive protein in patients with chronic rheumatic diseases and may contribute to cardiovascular risk," Arthr. Rheu., Vol. 50, S308-S9. Jump, R., Robinson, M., Armstrong, A., Barnes, E., Kilbourn, K., Richards, H., 2005, "Fatigue in systematic lupus erthematosus: Contributions of disease activity, pain, depression, and perceived social support," J Rheu., Vol. 32, 1699-705.
Robinson, M.	Past	Chung, K. (2002-2007)	Chung, K., Price, D., Verne, G., Robinson, M., 2007, "Revelation of a personal placebo response: Its effects on mood, attitudes and future placebo responding," Pain, Vol. 132, 281-8. Stutts, L., McCulloch, R., Chung, K., Robinson, M., 2009, "Sex differences in prior pain experience," J. Pain, Vol. 10, Issue 12, 1226-30.

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Robinson, M.	Past	Hirsch, A. (2002-2008)	Robinson, M., Bulcourn, B., Atchison, J., Berger, J., Lafayette-Lucy, A., Hirsh, A., et al, 2004, "Compliance in pain rehabilitation: Patient and provider perspectives," Pain Med., Vol. 5, 66-80. Robinson, M., George, S., Dannecker, E., Jump, R., Hirsh, A., Gagnon, C., et al, 2004, "Sex differences in pain anchors revisited: further investigation of "most intense" and common pain events," Euro. J. Pain, Issue 8, 299-304. Robinson, M., Brown, J., George, S., Edwards, P., Atchison, J., Hirsh, A., et al, "Multidimensional success criteria and expectations for treatment of chronic pain: the patient perspective," Pain Med., Issue 6, 336-45. Hirsh, A., George, S., Riley, J., Robinson, M., 2007, "An evaluation of the measurement of pain catastrophizing by the coping strategies questionnaire," Euro. J. Pain, Issue 11, 75-81. Hirsh, A., Alqudah, A., Stutts, L., Robinson, M., 2008, "Virtual human technology: capturing sex, race, and age influences in individual pain decision policies," Pain, Vol. 140, Issue 1, 231-8, PMCID: PMC2586418. Hirsh, A., George, S., Robinson, M., 2009, "Pain assessment and treatment disparities: A virtual human technology investigation," Pain. Issue 143, 106-13. Hirsh, A., Jensen, M., Robinson, M., 2010, "Evaluation of nurses' self-insight into their pain assessment and treatment decisions," J. Pain, Issue 11, 454-61. Stutts, L., Hirsh, A., George, S., Robinson, M., 2010, "Investigating patient characteristics on pain assessment using virtual human technology," Eur. J. Pain, Vol. 14, Issue 10, 1040-5, PMCID: PMC2980573. Wandner, L., Stutts, L., Alqudah, A., Craggs, J., Scipio, C., Hirsh, A., Robinson, M., 2010, "Virtual human technology: patient demographics and healthcare training factors in pain observation and treatment recommendations," J. Pain Res., Vol. 3, 241-7, PMCID: PMC3033032. Hirsh, A., Callander, S., Robinson, M., 2011, "Patient demographic characteristics and facial expressions influence nurses' assessment of mood in the context of pain: A Virtual Human and lens model investigation," Int. J. Nurs. Stud. Wandner, L., Scipio, C., Hirsh, A., Torres, C., Robinson, M., 2012, "The perception of pain in others: how gender, race, and age influence pain expectations," J. Pain, Vol. 13, Issue 3, 220-7.
Robinson, M.	Past	Alqudah, A. (2003-2007)	Hirsh, A., Alqudah, A., Stutts, L., Robinson, M., 2008, "Virtual human technology: capturing sex, race, and age influences in individual pain decision policies," Pain, Vol. 140, Issue 1, 231-8, PMCID: PMC2586418. Wandner, L., Stutts, L., Alqudah, A., Craggs, J., Scipio, C., Hirsh, A., Robinson, M., 2010, "Virtual human technology: patient demographics and healthcare training factors in pain observation and treatment recommendations," J. Pain Res., Vol. 3, 241-7, PMCID: PMC3033032.

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Robinson, M.	Past	O'Brien, E. (2003-2008)	O'Brien, E., Mindell, J., 2005, "Sleep and risk-taking behavior in adolescents," Behav. Sleep Med., Vol. 3, Issue 3, 113-33. O'Brien, E., Atchison, J., Gremillion, H., Waxenberg, L., Robinson, M., 2008, "Somatic focus/awareness: Relationship to negative affect and pain in chronic pain patients," Eur. J. Pain., Vol. 12, Issue 1, 104-15, PMID: PMC2730152. O'Brien, E., Staud, R., Hassinger, A., McCulloch, R., Craggs, J., Atchison, J., Price, D., Robinson, M., 2010, "Patient-centered perspective on treatment outcomes in chronic pain," Pain Med., Vol. 11, Issue 1, 6-15. Dzierzewski, J., O'Brien, E., Kay, D., McCrae, C., 2010, "Tackling sleeplessness: psychological treatment options for insomnia in older adults," Nat. Sci. Sleep, Vol. 2, 47-61, PMID: PMC3273867. O'Brien, E., Waxenberg, L., Atchison, J., Gremillion, H., Staud, R., McCrae, C., Robinson, M., 2010, "Negative mood mediates the effect of poor sleep on pain among chronic pain patients," Clin. J. Pain, Vol. 26, Issue 4, 310-9.
Robinson, M.	Past	McCulloch, R. (2004-2009)	Stutts, L., Robinson, M., McCulloch, R., Banou, E., Waxenberg, L., Gremillion, H., Staud, R., 2009, "Patient-centered outcome criteria for successful treatment of facial pain and fibromyalgia," J. Orofac. Pain., Vol. 23, Issue 1, 47-53. Stutts, L., McCulloch, R., Chung, K., Robinson, M., 2009, "Sex differences in prior pain experience," J. Pain, Vol. 10, Issue 12, 1226-30. O'Brien, E., Staud, R., Hassinger, A., McCulloch, R., Craggs, J., Atchison, J., Price, D., Robinson, M., 2010, "Patient-centered perspective on treatment outcomes in chronic pain," Pain Med., Vol. 11, Issue 1, 6-15.
Robinson, M.	Past	Stutts, L. (2005-2010)	Sears, S., Stutts, L., Aranfa, J., Handberg, E., Conti, J., 2006, "Managing congestive heart failure patient factors in the device era," Congest. Heart Fail., Vol. 12, Issue 6, 335-40. Stutts, L., Cross, N., Conti, J., Sears, S., 2007, "Examination of research trends on patient factors in patients with implantable cardioverter defibrillators," Clin. Cardiol., Vol. 30, Issue 1, 64-8. Stutts, L., Conti, J., Aranda, J., Miles, W., Burkart, T., Sears, S., 2007, "Patient evaluation of ICD recall communication strategies: a vignette study," Pacing Clin. Electrophysiol., Vol. 30, Issue 9, 1105-11. Hirsh, A., Alqudah, A., Stutts, L., Robinson, M., 2008, "Virtual human technology: capturing sex, race, and age influences in individual pain decision policies," Pain, Vol. 140, Issue 1, 231-8, PMID: PMC2586418. Stutts, L., Robinson, M., McCulloch, R., Banou, E., Waxenberg, L., Gremillion, H., Staud, R., 2009, "Patient-centered outcome criteria for successful treatment of facial pain and fibromyalgia," J. Orofac. Pain., Vol. 23, Issue 1, 47-53. Stutts, L., McCulloch, R., Chung, K., Robinson, M., 2009, "Sex differences in prior pain experience," J. Pain, Vol. 10, Issue 12, 1226-30. Stutts, L., Hirsh, A., George, S., Robinson, M., 2010, "Investigating patient characteristics on pain assessment using virtual human technology," Eur. J. Pain, Vol. 14, Issue 10, 1040-5, PMID: PMC2980573. Wandner, L., Stutts, L., Alqudah, A., Craggs, J., Scipio, C., Hirsh, A., Robinson, M., 2010, "Virtual human technology: patient demographics and healthcare training factors in pain observation and treatment recommendations," J. Pain Res., Vol. 3, 241-7, PMID: PMC3033032.

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Robinson, M.	Past	Nisenzon, A. (2006-2011)	Mikos, A., Springer, U., Nisenzon, A. , Kellison, I., Fernandez, H., Okun, M., Bowers, D., 2009, "Awareness of expressivity deficits in non-demented Parkinson disease," Clin. Neuropsychol., Vol. 23, Issue 5, 805-17. Nisenzon, A. , Robinson, M., Bowers, D., Banou, E., Malaty, I., Okun, M., 2011, "Measurement of patient-centered outcomes in Parkinson's disease: what do patients really want from their treatment?" Parkinsonism Relat. Disord., Vol. 17, Issue 2, 89-94, PMCID: PMC3034811.
Robinson, M.	Current	Roditi, D. (2008-)	Roditi, D. , Robinson, M., Litwins, N., 2009, "Effects of coping statements on experimental pain in chronic pain patients," J. Pain Res., Vol. 2, 109-16, PMCID: PMC3004623. Dzierzewski, J., Williams, J., Roditi, D. , Marsiske, M., McCoy, K., McNamara, J., Dautovich, N., Robinson, M., McCrae, C., 2010, "Daily variations in objective nighttime sleep and subjective morning pain in older adults with insomnia: evidence of covariation over time," J. Am. Geriatr. Soc., Vol. 58, Issue 5, 925-30, PMCID: PMC2924958. Roditi, D. , Waxenberg, L., Robinson, M., 2010, "Frequency and perceived effectiveness of coping define important subgroups of patients with chronic pain," Clin. J. Pain, Vol. 26, Issue 8, 677-82. Kisaalita, N., Roditi, D. , Robinson, M., 2011, "Factors affecting placebo acceptability: deception, outcome, and disease severity," J. Pain, Vol. 12, Issue 8, 920-8. Roditi, D. , Robinson, M., 2011, "The role of psychological interventions in the management of patients with chronic pain," Psychol. Res. Behav. Manag., Vol. 4, 41-9, PMCID: PMC3218789. Sanderson, K., Roditi, D. , George, S., Atchison, J., Banou, E., Robinson, M., 2012, "Investigating patient expectations and treatment outcome in a chronic low back pain population," J. Pain Res., Vol. 5, 15-22, PMCID: PMC3273403.
Robinson, M.	Current	*Anderson, R. (2009-)	Anderson, R. , McCrae, C., Staud, R., Berry, R., Robinson, M., 2012, "Predictors of clinical pain in fibromyalgia: examining the role of sleep," J. Pain.
Robinson, M.	Current	*Kisaalita, N. (2009-)	Kisaalita, N. , Roditi, D., Robinson, M., 2011, "Factors affecting placebo acceptability: deception, outcome, and disease severity," J. Pain, Vol. 12, Issue 8, 920-8.
Robinson, M.	Current	*Wandner, L. (2009-)	Wandner, L. , Stutts, L., Alqudah, A., Craggs, J., Scipio, C., Hirsh, A., Robinson, M., 2010, "Virtual human technology: patient demographics and healthcare training factors in pain observation and treatment recommendations," J. Pain Res., Vol. 3, 241-7, PMCID: PMC3033032. Wandner, L. , Scipio, C., Hirsh, A., Torres, C., Robinson, M., 2012, "The perception of pain in others: how gender, race, and age influence pain expectations," J. Pain, Vol. 13, Issue 3, 220-7.
Robinson, M.	Current	*Sanderson, K. (2010-)	Sanderson, K. , George, S., Atchinson, J., Banou, E., Robinson, M., 2012, "Investigating patient expectations and treatment outcome in a chronic low back pain population," J. Pain Res., Issue 5, 15-22.
Robinson, M.	Current	*Letzen, J. (2011-)	No Publications
Tucker, C.	Past	Hackshaw, R. (1995-2005)	No Publications

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Tucker, C.	Past	Higley, B. (1997-2006)	Tucker, C., Fennell, R., Pedersen, T., Higley, B. , Wallack, C., Person, S., 2002, "Associations with medication adherence among ethnically different pediatric patients with renal transplants," <i>Pediatr. Nephrol.</i> , Vol. 17, Issue 4, 251-6. Tucker, C., Herman, K., Pedersen, T., Higley, B. , Montrichard, M., Ivery, P., 2003, "Cultural sensitivity in physician-patient relationships: perspectives of an ethnically diverse sample of low-income primary care patients," <i>Med. Care</i> , Vol. 41, Issue 7, 859-70.
Tucker, C.	Past	Ivery, P. (1997-2009)	Tucker, C., Herman, K., Pedersen, T., Higley, B., Montrichard, M., Ivery, P. , 2003, "Cultural sensitivity in physician-patient relationships: perspectives of an ethnically diverse sample of low-income primary care patients," <i>Med. Care</i> , Vol. 41, Issue 7, 859-70.
Tucker, C.	Past	Wallack, C. (1998-2007)	Tucker, C., Fennell, R., Pedersen, T., Higley, B., Wallack, C. , Person, S., 2002, "Associations with medication adherence among ethnically different pediatric patients with renal transplants," <i>Pediatr. Nephrol.</i> , Vol. 17, Issue 4, 251-6. Pasco, S., Wallack, C. , Sartin, R., Dayton, R., 2012, "The impact of experiential exercises on communication and relational skills in a suicide prevention gatekeeper-training program for college resident advisors," <i>J. Am. Coll. Health</i> , Vol. 60, Issue 2, 134-40.
Tucker, C.	Past	Jackson, E. (1998-2008)	Jackson, E. , Tucker, C., Herman, K., 2007, "Health value, perceived social support, and health self-efficacy as factors in a health-promoting lifestyle," <i>J. Am. Coll. Health</i> , Vol. 56, Issue 1, 69-74.
Tucker, C.	Past	Richards, C. (2000-2005)	Richards, C. , Tucker, C., Brozyna, A., Ferdinand, L., Shapiro, M., 2009, "Social and cognitive factors associated with preventative health care behaviors of culturally diverse adolescents," <i>J. Natl. Med. Assoc.</i> , Vol. 101, Issue 3, 236-42.
Tucker, C.	Past	Porter, T. (2000-2010)	No Publications
Tucker, C.	Past	Mirsu-Paun, A. (2001-2007)	Tucker, C., Mirsu-Paun, A. , Van den Berg, J., Ferdinand, L., Jones, J., Curry, R., Rooks, L., Walter, T., Beato, C., 2007, "Assessments for measuring patient-centered cultural sensitivity in community-based primary care clinics," <i>J. Natl. Med. Assoc.</i> , Vol. 99, Issue 6, 609-19, PMID: PMC2574382. Mirsu-Paun, A. , Tucker, C., Herman, K., Hernandez, C., 2010, "Validation of a provider self-report inventory for measuring patient-centered cultural sensitivity in health care using a sample of medical students," <i>J. Comm. Health</i> , Vol. 35, Issue 2, 198-207. Mirsu-Paun, A. , Tucker, C., Armenteros, E., 2012, "Family interaction patterns and their association with family support among women with breast cancer," <i>Cancer Nurs.</i> , Vol. 35, Issue 3, 11-21.
Tucker, C.	Past	Mack, C. (2001-2008)	No Publications
Tucker, C.	Past	Ferdinand, L. (2002-2008)	Richards, C., Tucker, C., Brozyna, A., Ferdinand, L. , Shapiro, M., 2009, "Social and cognitive factors associated with preventative health care behaviors of culturally diverse adolescents," <i>J. Natl. Med. Assoc.</i> , Vol. 101, Issue 3, 236-42.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
Tucker, C.	Past	Van den Berg, J. (2002-2009)	Tate, D., Van den Berg, J. , Hansen, N., Kochman, A., Sikkema, K., 2006, "Race, social support, and coping strategies among HIV-positive gay and bisexual men," Cult. Health Sex., Vol. 8, Issue 3, 235-49. Tucker, C., Mirsu-Paun, A., Van den Berg, J. , Ferdinand, L., Jones, J., Curry, R., Rooks, L., Walter, T., Beato, C., 2007, "Assessments for measuring patient-centered cultural sensitivity in community-based primary care clinics," J. Natl. Med. Assoc., Vol. 99, Issue 6, 609-19, PMID: PMC2574382.
Tucker, C.	Past	Brozyna, A. (2004-2010)	Richards, C., Tucker, C., Brozyna, A. , Ferdinand, L., Shapiro, M., 2009, "Social and cognitive factors associated with preventative health care behaviors of culturally diverse adolescents," J. Natl. Med. Assoc., Vol. 101, Issue 3, 236-42.
Tucker, C.	Past	Jones, J. (2004-2010)	Tucker, C., Mirsu-Paun, A., Van den Berg, J., Ferdinand, L., Jones, J. , Curry, R., Rooks, L., Walter, T., Beato, C., 2007, "Assessments for measuring patient-centered cultural sensitivity in community-based primary care clinics," J. Natl. Med. Assoc., Vol. 99, Issue 6, 609-19, PMID: PMC2574382. Jones, J., Tucker, C., Herman, K., 2009, "Stress and nutrition among African American women with hypertension," Am. J. Health Behav., Vol. 33, Issue 6, 661-72.
Tucker, C.	Past	Daly, K. (2006-2011)	No Publications
Tucker, C.	Past	Bailey, T. (2003-)	No Publications
Tucker, C.	Past	Nghiem, K. (2003-)	Delaney, P., Nghiem, K. , Waldum, E., 2009, "The selective directed forgetting effect: can people forget only part of a text?" Q. J. Exp. Psych., Vol. 62, Issue 8, 1542-50.
Tucker, C.	Past	Lopez, M. (2005-)	No Publications
Tucker, C.	Past	Kaye, L. (2006-)	Tucker, C., Rice, K., Hou, W., Kaye, L. , Nolan, S., Grandoit, D., Gonzales, L., Smith, M., Desmong, F., 2011, "Development of the motivators of and barriers to health-smart behaviors inventory," Psych. Assess., Vol. 23, Issue 2, 487-503. Tucker, C., Rice, K., Desmond, F., Hou, W., Kaye, L. , Smith, T., 2011, "The youth form of the motivators of and barriers to health-smart behaviors inventory," Psych. Assess. Kaye, L. , Tucker, C., Bragg, M., Estampador, A., 2011, "Low-income children's reported motivators of and barriers to healthy eating behaviors: a focus group study," J. Natl. Med. Assoc., Vol. 103, Issue 9-10, 941-51.
Tucker, C.	Past	Flenar Grandoit, D. (2008-)	Tucker, C., Rice, K., Hou, W., Kaye, L., Nolan, S., Grandoit, D. , Gonzales, L., Smith, M., Desmong, F., 2011, "Development of the motivators of and barriers to health-smart behaviors inventory," Psych. Assess., Vol. 23, Issue 2, 487-503.
Tucker, C.	Past	Nolan, S. (2008-)	Tucker, C., Rice, K., Hou, W., Kaye, L., Nolan, S. , Grandoit, D., Gonzales, L., Smith, M., Desmong, F., 2011, "Development of the motivators of and barriers to health-smart behaviors inventory," Psych. Assess., Vol. 23, Issue 2, 487-503.

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Veloza, C.	Past	*Byers, K. (2000-2004)	Wang, Y., Byers, K., Veloza, C., 2008, "Rasch analysis of Minimum Data Set mandated in skilled nursing facilities," J. Rehabil. Res. Dev., Vol. 45, Issue 9, 1385-99. Veloza, C., Byers, K., Wang, Y., Joseph, B., 2007, "Translating measures across the continuum of care: using Rasch analysis to create a crosswalk between the Functional Independence Measure and the Minimum Data Set," J. Rehabil. Res. Dev., Vol. 44, Issue 3, 467-78. Wang, Y., Byers, K., Veloza, C., 2008, "Validation of FIM_MDS crosswalk conversion algorithm," J. Rehabil. Res. Dev., Vol. 45, Issue 7, 1065-76.
Veloza, C.	Past	Justiss, M. (2002-2005)	Mann, W., Goodall, S., Justiss, M., Tomita, M., 2002, "Dissatisfaction and nonuse of assistive devices among frail elders," Assist. Technol., Vol. 14, Issue 2, 130-9. Shechtman, O., Mann, W., Justiss, M., Tomita, M., 2004, "Grip strength in the frail elderly," Am. J. Phys. Med. Rehabil., Vol. 83, Issue 11, 819-26. Mann, W., Kimble, C., Justiss, M., Casson, E., Tomita, M., Wu, S., 2005, "Problems with dressing in the frail elderly," Am. J. Occup. Ther., Vol. 59, Issue 4, 398-408. Mann, W., Johnson, J., Lynch, L., Justiss, M., Tomita, M., Wu, S., 2008, "Changes in impairment level, functional status, and use of assistive devices by older people with depressive symptoms," Am. J. Occup. Ther., Vol. 62, Issue 1, 9-17. Stav, W., Justiss, M., McCarthy, D., Mann, W., Lanford, D., 2008, "Predictability of clinical assessments for driving performance," J. Safety Res., Vol. 39, Issue 1, 1-7. Boustani, M., Justiss, M., 2008, "Subtle neurological abnormalities and functional cognition in older adults," Arch. Intern. Med., Vol. 168, Issue 12, 1252-3. Justiss, M., Boustani, M., Fox, C., Katona, C., Perkins, A., Healey, P., Sachs, G., Hui, S., Callahan, C., Hendrie, H., Scott, E., 2009, "Patients' attitudes of dementia screening across the Atlantic," Int. J. Geriatr. Psych., Vol. 24, Issue 6, 632-7. Boustani, M., Justiss, M., Frame, A., Austrom, M., Perkins, A., Cai, X., Sachs, G., Torke, A., Monahan, P., Hendrie, H., 2011, "Caregiver and noncaregiver attitudes toward dementia screening," J. Am. Geriatr. Soc., Vol. 59, Issue 4, 681-6, PMID: PMC3125691.

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Velozo, C.	Past	Woodbury, M. (2002-2006)	Woodbury, M., Velozo, C., Richards, L., Duncan, P., Studenski, S., Lai, S., 2007, "Dimensionality and construct validity of the Fugl-Meyer Assessment of the upper extremity," Arch. Phys. Med. Rehabil., Vol. 88, Issu 6, 715-23. Richards, L., Senesac, C., David, S., Woodbury, M., Nadeau, S., 2008, "Bilateral arm training with rhythmic auditory cueing in chronic stroke: not always efficacious," Neurorehabil. Neural Repair, Vol. 22, Issue 2, 180-4. Richards, L., Stewart, K., Woodbury, M., Senesac, C., Cauraugh, J., 2008, "Movement-dependent stroke recovery: a systematic review and meta-analysis of TMS and fMRI evidence," Neuropsychologia, Vol. 46, Issue 1, 3-11, PMID: PMC2248459. Woodbury, M., Velozo, C., Richards, L., Duncan, P., Studenski, S., Lai, S., 2008, "Longitudinal stability of the Fugl-Meyer Assessment of the upper extremity," Arch. Phys. Med. Rehabil., Vol. 89, Issue 8, 1563-9. Woodbury, M., Howland, D., McGuirk, T., Davis, S., Senesac, C., Kautz, S., Richards, L., 2009, "Effects of trunk restraint combined with intensive task practice on poststroke upper extremity reach and function: a pilot study," Neurorehab. Neural. Repair, Vol. 23, Issue 1, 78=91. Velozo, C., Woodbury, M., 2011, "Translating measurement findings into rehabilitation practice: an example using Fugl-Meyer Assessment-Upper Extremity with patients following stroke," J. Rehabil. Res. Dev., Vol. 48, Issue 10, 1211-22.
Velozo, C.	Past	Wang, Y. (2002-2007)	Wang, Y., Byers, K., Velozo, C., 2008, "Rasch analysis of Minimum Data Set mandated in skilled nursing facilities," J. Rehabil. Res. Dev., Vol. 45, Issue 9, 1385-99. Velozo, C., Byers, K., Wang, Y., Joseph, B., 2007, "Translating measures across the continuum of care: using Rasch analysis to create a crosswalk between the Functional Independence Measure and the Minimum Data Set," J. Rehabil. Res. Dev., Vol. 44, Issue 3, 467-78. Wang, Y., Byers, K., Velozo, C., 2008, "Validation of FIM_MDS crosswalk conversion algorithm," J. Rehabil. Res. Dev, Vol. 45, Issue 7, 1065-76. Lehman, L., Woodbury, M., Shechtman, O., Wang, Y., Pomeranz, J., Gray, D., Velozo, C., 2011, "Development of an item bank for a computerized adaptive test of upper-extremity function," Disabil. Rehabil., Vol. 33, Issue 21-22, 2092-104.
Velozo, C.	Past	Lehman, L. (2002-2008)	Lehman, L., Sindhu, B., Shechtman, O., Romero, S., Velozo, C., 2010, "A comparison of the ability of two upper extremity assessments to measure change in function," J. Hand Ther., Vol. 23, Issue 1, 31-9. Lehman, L., Velozo, C., 2010, "Ability to detect change in patient function: responsiveness designs and methods of calculation," J. Hand Ther., Vol. 23, Issue 4, 361-70. Lehman, L., Sindhu, B., Johnson, J., Velozo, C., 2011, "Creating a clinically useful data collection form for the DASH questionnaire," Am. J. Occup. Ther., Vol. 65, Issue 1, 45-54. Lehman, L., Woodbury, M., Shechtman, O., Wang, Y., Pomeranz, J., Gray, D., Velozo, C., 2011, "Development of an item bank for a computerized adaptive test of upper-extremity function," Disabil. Rehabil., Vol. 33, Issue 21-22, 2092-104. Lehman, L., Woodbury, M., Velozo, C., 2011, "Examination of the factor structure of the Disabilities of the Arm, Shoulder, and Hand questionnaire," Am. J. Occup. Ther., Vol. 65, Issue 2, 169-78.
Velozo, C.	Past	Wang, J. (2003-2009)	Velozo, C., Wang, Y., Lehman, L., Wang, J., 2008, "Utilizing Rasch measurement models to develop a computer adaptive self-report of walking, climbing, and running," Disabil. Rehab., Vol. 30, Issue 6, 458-67.

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Veloza, C.	Past	Waid-Ebbs, K. (2003-2008)	Classen, S., Levy, C., McCarthy, D., Mann, W., Lanford, D., Waid-Ebbs, J. , 2009, "Traumatic brain injury and driving assessment: an evidence based literature review," Am. J. Occup. Ther., Vol. 63, Issue 5, 580-91. Donovan, N., Heaton, S., Kimberg, C., Wen, P., Waid-Ebbs, K. , Coster, W., Singletary, F., Vellozo, C., 2011, "Conceptualizaing functional cognition in traumatic brain injury rehabilitation," Brain Inj., Vol. 25, Issue 4, 348-64.
Veloza, C.	Past	Romero, S. (2004-2008)	Lehman, L., Sindhu, B., Shechtman, O., Romero, S. , Vellozo, C., 2010, "A comparison of the ability of two upper extremity assessments to measure change in function," J. Hand Ther., Vol. 23, Issue 1, 31-9. Del Toro, C., Bislick, L., Comer, M., Vellozo, C., Romero, S. , Gonzalez-Rothi, L., Kendall, D., 2011, "Development of a short form of the Boston naming test for individuals with aphasia," J. Speech Lang. Hear. Res., Vol. 54, Issue 4, 1089-100. Romero, S. , Bishop, M., Vellozo, C., Light, K., 2011, "Minimum detectable change of the Berg Balance Scale and Dynamics Gait Index in older persons at risk for falling," J. Geriatr. Phys. Ther., Vol. 34, Issue 3, 131-7.
Veloza, C.	Past	Wen, P. (2004-2009)	Donovan, N., Heaton, S., Kimberg, C., Wen, P. , Waid-Ebbs, K., Coster, W., Singletary, F., Vellozo, C., 2011, "Conceptualizaing functional cognition in traumatic brain injury rehabilitation," Brain Inj., Vol. 25, Issue 4, 348-64. Huang, I., Wen, P. , Revicki, D., Shenkman, E., 2011, "Quality of life measurement for children with life-threatening conditions: limitations and a new framework," Child Indic. Res., Vol. 4, Issue 1, 145-60, PMID: PMC3133777. Huang, I., Quinn, G., Wen, P. , Shenkman, E., Revicki, D., Krull, K., Li, Z., Shearer, P., 2011, "Using three legacy measures to develop a health-related quality of life tool for young adult survivors of childhood cancer," Qual. Life Res. Classen, S., Wen, P. , Vellozo, C., Bedard, M., Winter, S., Brumback, B., Lanford, D., 2012, "Rater reliability and rater effects of the Safe Driving Behavior Measure," Am. J. Occup. Ther., Vol. 66, Issue 1, 69-77. Classen, S., Wen, P. , Vellozo, C., Bedard, M., Winter, S., Brumback, B., Lanford, D., 2012, "Psychometrics of the self-report safe driving behavior measure for older adults," Am. J. Occup. Ther., Vol. 66, Issue 2, 233-41.
Veloza, C.	Past	Choi, B. (2001-2010)	Veloza, C., Choi, B., Zylstra, S., Santopalo, R., 2006, "Measurement qualities of a self-report and therapist0scored functional capacity instrument based on the Dictionary of Occupational Titles," J. Occup. Rehabil., Vol. 16, Issue 1, 109-22.
Veloza, C.	Current	*Berger, K. (2010-)	No Publications
Weber, B.	Current	Cunningham, C. (2008-)	No Publications
West, R.	Past	Thorn, R. (1994-2003)	West, R., Thorn, R., Bagwell, D., 2003, "Memory performance and beliefs as a function of goal setting and aging," Psychol. Aging, Vol. 18, Issue 1, 111-25.
West, R.	Past	Semegon, A. (1998-2006)	Diehl, M., Semegon, A., Schwarzer, R., 2006, "Assessing attention control in goal pursuit: a component of dispositional self-regulation," J. Pers. Assess., Vol. 86, Issue 3, 306-17, PMID: PMC2442651.

Mentor(s)	Past / Current	Name of Trainee (Years in Program)	Publication (Authors, Year, Title, Journal, PMID)
West, R.	Past	Smith, S. (2001-2003)	Smith, S., Gerhardt, K., Griffiths, S., Huang, X., Abrams, R., 2003, "Intelligibility of sentences recorded from the uterus of a pregnancy ewe and from the fetal inner ear," <i>Audiol. Neuro.</i>, Vol. 8, Issue 6, 347-53. Smith, S., West, R., 2006, "The application of self-efficacy principles to audiologic rehabilitation: a tutorial," <i>Am. J. Audiol.</i>, Vol. 15, Issue 1, 46-56. Wilson, R., McArdle, R., Smith, S., 2007, "An evaluation of the BKB-SIN, HINT, QuickSIN, and WIN materials on listeners with normal hearing and listeners with hearing loss," <i>J. Speech Lang Hear. Res.</i>, Vol. 50, Issue 4, 844-56. West, R., Smith, S., 2007, "Development of a hearing aid self-efficacy questionnaire," <i>Int. J. Audiol.</i>, Vol. 46, Issue 12, 759-71. Smith, S., Bennett, L., Wilson, R., 2008, "Prevalence and characteristics of dual sensory impairment (hearing and vision) in a veteran population," <i>J. Rehabil. Res. Dev.</i>, Vol. 45, Issue 4, 597-609.
West, R.	Past	Dark-Freudman, A. (2004-2009)	West, R., Bagwell, D., Dark-Freudman, A., 2005, "Memory and goal setting: the response of older and younger adults to positive and objective feedback," <i>Psychol. Aging</i>, Vol. 20, Issue 2, 195-201. West, R., Dark-Freudman, A., Bagwell, D., 2009, "Goals-feedback conditions and episodic memory: Mechanisms for memory gains in older and younger adults," <i>Memory</i>, Vol. 17, Issue 2, 233-44. West, R., Bagwell, D., Dark-Freudman, A., 2008, "Self-efficacy and memory aging: the impact of a memory intervention based on self-efficacy," <i>Neuropsych. Dev. Cogn. B Aging Neuropsych. Cogn.</i>, Vol. 15, Issue 3, 302-29.
West, R.	Past	Bensadon, B. (2005-2010)	No Publications
West, R.	Past	Hastings, E. (2006-2011)	Hastings, E., West, R., 2009, "The relative success of a self-help and a group-based memory training program for older adults," <i>Psychol. Aging</i>, Vol. 24, Issue 3, 586-94, PMID: PMC3037734. Hastings, E., Karas, T., Winsler, A., Way, E., Madigan, A., Tyler, S., 2009, "Young children's video/computer game use: relations with school performance and behavior," <i>Issues Ment. Health Nurs.</i>, Vol. 30, Issue 10, 638-49, PMID: PMC3041171. West, R., Hastings, E., 2011, "Self-regulation and recall: growth curve modeling of intervention outcomes for older adults," <i>Psychol. Aging</i>, Vol. 26, Issue 4, 803-12. Hastings, E., West, R., 2011, "Goal orientation and self-efficacy in relation to memory in adulthood," <i>Neuropsychol. Dev. Cogn. B Aging Neuropsychol. Cogn.</i>, Vol. 18, Issue 4, 471-93.

Table 7A. Admissions and Completion Records for the Participating Departments and Programs During the Past Five Years (Predoctoral Applicants)

Department / Program	Entering Year	Applicants Applied (TGE) A	Applicants Accepted (TGE) A	Applicants Enrolled (TGE) A/B/C	Trainees Still in Program (TGE) A/B/C	Trainees Completed Program Earned PhD or MD/PhD (TGE) A/B/C	Trainees Left Program Earned Other Degree (TGE) A/B/C	Trainees Left Program Without Degree (TGE) A/B/C	Reason for Leaving Program (if training was not completed)
Aging and Geriatric Research	N/A								
Applied Physiology and Kinesiology	2007	42 (23) 0	12 (7) 0	10 (7) 0/0/0	5 (4) 0/0/0	3 (2) 0/0/0	0 (0) 0/0/0	1 (1) 0/0/0	Medical Problems Changed dept.
Applied Physiology and Kinesiology	2008	39 (26) 0	5 (1) 0	5 (1) 0/0/0	3 (1) 0/0/0	0 (0) 0/0/0	1 (1) 0/0/0	2 (2) 0/0/0	Resigned, Changed dept
Applied Physiology and Kinesiology	2009	47 (25) 0	9 (3) 1	8 (3) 1/0/0	8 (3) 1/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Applied Physiology and Kinesiology	2010	43 (18) 0	16 (4) 0	10 (4) 0/0/0	9 (4) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	1 (1) 0/0/0	Resigned
Applied Physiology and Kinesiology	2011	46 (22) 0	17 (4) 0	10 (4) 0/0/0	10 (4) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Clinical and Health Psychology	2007	280 (251) 42	15 (15) 1	14 (14) 1/0/0	12 (12) 1/0/0	0 (0) 0/0/0	2 (2) 0/0/0	2 (2) 0/0/0	Physics program, medical school
Clinical and Health Psychology	2008	308 (294) 51	15 (15) 3	15 (14) 3/0/0	15 (14) 3/0/0	0 (0) 0/0/0	1 (0) 0/0/0	1 (0) 0/0/0	Personal reasons
Clinical and Health Psychology	2009	300 (279) 47	17 (16) 3	13 (13) 2/0/0	13 (13) 2/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Clinical and Health Psychology	2010	351 (310) 56	17 (16) 3	15 (10) 3/0/0	15 (10) 3/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Clinical and Health Psychology	2011	310 (306) 48	20 (18) 3	16 (14) 3/0/0	16 (14) 3/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Health Services Research Management and Policy	2007	10 (2) 0	3 (2) 0	2 (1) 0/0/0	2 (1) 0/0/0	2 (1) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	

Department / Program	Entering Year	Applicants Applied (TGE) A	Applicants Accepted (TGE) A	Applicants Enrolled (TGE) A/B/C	Trainees Still in Program (TGE) A/B/C	Trainees Completed Program Earned PhD or MD/PhD (TGE) A/B/C	Trainees Left Program Earned Other Degree (TGE) A/B/C	Trainees Left Program Without Degree (TGE) A/B/C	Reason for Leaving Program (if training was not completed)
Health Services Research Management and Policy	2008	14 (0) 0	5 (0) 0	4 (0) 0/0/0	4 (0) 0/0/0	2 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Health Services Research Management and Policy	2009	20 (2) 2	6 (2) 2	6 (2) 2/0/0	4 (1) 1/0/0	2 (1) 1/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Health Services Research Management and Policy	2010	19 (2) 1	4 (1) 1	4 (1) 1/0/0	3 (1) 1/0/0	0 (0) 0/0/0	1 (0) 0/0/0	0 (0) 0/0/0	Academic
Health Services Research Management and Policy	2011	23 (19) 6	5 (3) 1	5 (3) 1/0/0	5 (3) 1/0/0	0 (0) 0/0/0	1 (0) 0/0/0	0 (0) 0/0/0	Academic
Interdisciplinary Program in Biomedical Sciences (Neuroscience)	2007	243 (122) 27	104 (61) 11	54 (28) 5/0/0	23 (13) 0/0/0	21 (7) 3/0/0	10 (8) 2/0/0	0 (0) 0/0/0	Moved with Mentor, personal, career choice change
Interdisciplinary Program in Biomedical Sciences	2008	360 (139) 40	90 (62) 12	49 (36) 10/0/0	35 (26) 7/0/0	3 (2) 0/0/0	13 (9) 3/0/0	0 (0) 0/0/0	Academic, career choice change
Interdisciplinary Program in Biomedical Sciences	2009	304 (135) 29	74 (47) 7	40 (26) 5/0/0	36 (23) 5/0/0	1 (1) 0/0/0	3 (2) 0/0/0	0 (0) 0/0/0	Personal
Interdisciplinary Program in Biomedical Sciences	2010	289 (147) 18	87 (59) 12	43 (28) 4/0/0	42 (27) 4/0/0	0 (0) 0/0/0	1 (1) 1/0/0	0 (0) 0/0/0	Academic
Interdisciplinary Program in Biomedical Sciences	2011	314 (135) 5	73 (50) 5	37 (26) 5/0/0	36 (26) 5/0/0	0 (0) 0/0/0	1 (0) 0/0/0	0 (0) 0/0/0	Leave of absence
Neurology	N/A								
Nursing Sciences (Adult and Elderly Nursing and Health Care Environments and Systems)	2007	9 (0) 4	1 (0) 0	1 (0) 0/0/0	27 (0) 1/0/0	6 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	

Department / Program	Entering Year	Applicants Applied (TGE) A	Applicants Accepted (TGE) A	Applicants Enrolled (TGE) A/B/C	Trainees Still in Program (TGE) A/B/C	Trainees Completed Program Earned PhD or MD/PhD (TGE) A/B/C	Trainees Left Program Earned Other Degree (TGE) A/B/C	Trainees Left Program Without Degree (TGE) A/B/C	Reason for Leaving Program (if training was not completed)
Nursing Sciences	2008	12 (0) 2	6 (0) 0	6 (0) 0/0/0	30 (0) 1/0/0	8 (0) 1/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Nursing Sciences	2009	10 (0) 3	5 (0) 2	3 (0) 2/0/0	28 (0) 0/0/0	4 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Nursing Sciences	2010	22 (0) 1	3 (0) 0	2 (0) 0/0/0	32 (0) 0/0/0	4 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Nursing Sciences	2011	13 (0) 1	7 (0) 1	5 (0) 1/0/0	37 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Psychology	2007	286 (0) 46	27 (0) 1	22 (0) 1/0/0	136 (0) 15/0/0	23 (0) 4/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Psychology	2008	298 (0) 57	26 (0) 3	18 (0) 1/0/0	127 (0) 12/0/0	27 (0) 2/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Psychology	2009	288 (0) 41	30 (0) 4	20 (0) 3/0/0	117 (0) 13/0/0	25 (0) 3/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Psychology	2010	367 (0) 67	33 (0) 4	28 (0) 3/0/0	119 (0) 14/0/0	22 (0) 3/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Psychology	2011	322 (0) 62	24 (0) 3	21 (0) 2/0/0	118 (0) 14/0/0	15 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Sociology	2007	62 (0) 5	16 (0) 1	9 (0) 0/0/0	58 (0) 11/0/0	9 (0) 4/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Sociology	2008	47 (0) 13	25 (0) 5	10 (0) 3/0/0	65 (0) 10/0/0	9 (0) 2/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Sociology	2009	51 (0) 14	28 (0) 6	14 (0) 5/0/0	72 (0) 13/0/0	10 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Sociology	2010	93 (0) 18	30 (0) 5	18 (0) 3/0/0	84 (0) 18/0/0	14 (0) 1/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Sociology	2011	66 (0) 7	35 (0) 0	10 (0) 0/0/0	87 (0) 18/0/0	6 (0) 1/0/0	0 (0) 0/0/0	0 (0) 0/0/0	

Department / Program	Entering Year	Applicants Applied (TGE) A	Applicants Accepted (TGE) A	Applicants Enrolled (TGE) A/B/C	Trainees Still in Program (TGE) A/B/C	Trainees Completed Program Earned PhD or MD/PhD (TGE) A/B/C	Trainees Left Program Earned Other Degree (TGE) A/B/C	Trainees Left Program Without Degree (TGE) A/B/C	Reason for Leaving Program (if training was not completed)
Speech Language Hearing	2007	13 (8) 1	4 (2) 0	3 (1) 0/0/0	3 (1) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Speech Language Hearing	2008	21 (4) 0	7 (4) 0	5 (3) 0/0/0	5 (3) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Speech Language Hearing	2009	18 (10) 0	6 (5) 1	6 (5) 1/0/0	6 (5) 1/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Speech Language Hearing	2010	11 (9) 2	6 (5) 0	5 (5) 0/0/0	5 (5) 0/0/0	0 (0) 0/0/0	1 (0) 0/0/0	0 (0) 0/0/0	Poor fit for major
Speech Language Hearing	2011	7 (5) 2	5 (4) 2	3 (3) 2/0/0	3 (3) 2/0/0	0 (0) 0/0/0	0 (0) 0/0/0	0 (0) 0/0/0	
Total All Programs	2007	945 (406) 125	182 (87) 14	109 (51) 7/0/0	266 (31) 28/0/0	64 (10) 11/0/0	12 (10) 2/0/0	3 (3) 0/0/0	Need not repeat above explanations
	2008	1099 (463) 163	179 (82) 23	112 (54) 17/0/0	284 (44) 33/0/0	49 (2) 5/0/0	15 (10) 3/0/0	3 (2) 0/0/0	
	2009	1038 (451) 136	175 (73) 26	110 (49) 21/0/0	284 (45) 36/0/0	42 (2) 4/0/0	3 (2) 0/0/0	0 (0) 0/0/0	
	2010	1195 (486) 163	196 (85) 25	125 (48) 14/0/0	309 (47) 40/0/0	40 (0) 4/0/0	3 (1) 1/0/0	1 (1) 0/0/0	
	2011	1101 (487) 131	186 (79) 15	107 (50) 14/0/0	312 (50) 43/0/0	21 (0) 1/0/0	2 (0) 0/0/0	0 (0) 0/0/0	
Sums all Years		5378 (2293) 718	918 (406) 103	563 (252) 73/0/0	1455 (217) 180	216 (14) 25/0/0	35 (23) 6/0/0	7 (6) 0/0/0	
Average all Years		1076 (459) 144	184 (81) 21	113 (50) 15/0/0	N/A	N/A	N/A	N/A	

Table 8A. Qualifications of Recent Predoctoral Applicants

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Aging									
2011	Applied Physiology and Kinesiology	1*	Rose Hulman Institute	BS – 2012	3.5	470, 740, 4	Y	Y	Y	N
2011	Applied Physiology and Kinesiology	2*	Miami University	MS – 2008	3.7	520, 690, 4.5	N	N	N	N
2011	Applied Physiology and Kinesiology	3*	U. of North Carolina	MS – 2011	3.5	430, 620, 4	N	N	N	N
2011	Applied Physiology and Kinesiology	4*	U. of Illinois	BS – 2012	3.5	450, 670, 3.5	Y	Y	Y	N
2011	Applied Physiology and Kinesiology	5	National Taiwan	BS – 2011		670, 800, 3	N	N	N	N
2011	Applied Physiology and Kinesiology	6*	U. of Florida	MS – 2011	3.0	390,620	Y	Y	Y	N
2011	Applied Physiology and Kinesiology	7*	California State	MS – 2012	3.6	710, 800, 5	Y	N	N	N
2011	Applied Physiology and Kinesiology	8	Inha University	PhD – 2012			N	N	N	N
2011	Applied Physiology and Kinesiology	9	Yonsi University	MS – 2011		690, 740, 2.5	N	N	N	N
2011	Applied Physiology and Kinesiology	10*	U. of Texas	MS – 2011	3.6	450, 710, 4	N	N	N	N
2011	Applied Physiology and Kinesiology	11*	U. of Michigan	BS – 2012	3.5	640, 710, 4.5	N	N	N	N
2011	Applied Physiology and Kinesiology	12	Korea National	MS – 2012		650, 800, 3.5	Y	Y	Y	N
2011	Applied Physiology and Kinesiology	13*	U. of North Florida	BS – 2012	3.3	700, 550, 4	N	N	N	N
2011	Applied Physiology and Kinesiology	14	Sheffield Hallam	MS – 2010		340, 680, 2.5	N	N	N	N
2011	Applied Physiology and Kinesiology	15	National Taiwan	MS – 2009		690, 800, 3	N	N	N	N
2011	Applied Physiology and Kinesiology	16	Nanyang Tech	MS – 2009		530, 730, 4	Y	Y	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Applied Physiology and Kinesiology	17	East China Normal	MS – 2008		490, 740, 3.5	N	N	N	N
2011	Applied Physiology and Kinesiology	18*	U. of Alabama	MS – 2012	4.0	450, 470, 4.5	N	N	N	N
2011	Applied Physiology and Kinesiology	19	U. of Florida	MS – 2012	3.8	640, 770, 3	Y	Y	Y	N
2011	Applied Physiology and Kinesiology	20	ChangGung University	MS – 2009		680, 800, 3.5	N	N	N	N
2011	Applied Physiology and Kinesiology	21	Loughborough University	MS – 2011		440, 720, 3	N	N	N	N
2011	Applied Physiology and Kinesiology	22*	Appalachian University	MS – 2012	3.7	550, 650	Y	Y	Y	N
2011	Applied Physiology and Kinesiology	23*	Texas Womens University	MS – 2012	3.0	470, 670, 3	N	N	N	N
2011	Applied Physiology and Kinesiology	24*	Jacksonville University	MS – 2011	3.9		N	N	N	N
2011	Applied Physiology and Kinesiology	25*	U. of Central Florida	MS – 2012	3.5	410, 640, 4.5	N	N	N	N
2011	Applied Physiology and Kinesiology	26	Kyung Hee University	MS – 2005		530, 690, 3	N	N	N	N
2011	Applied Physiology and Kinesiology	27	K.S.U. Faculty of Education	MS – 2005			N	N	N	N
2011	Applied Physiology and Kinesiology	28*	U. of Illinois at Chicago	MS – 2010	3.8	550, 560, 4	Y	Y	Y	N
2011	Applied Physiology and Kinesiology	29*	California State	MS – 2012	3.8	490, 720, 4	N	N	N	N
2011	Applied Physiology and Kinesiology	30*	East Tennessee	MS – 2010	3.9	560, 720, 4	N	N	N	N
2011	Applied Physiology and Kinesiology	31	U. of Kentucky	MS – 2012	3.1	320, 570, 3.5	N	N	N	N
2011	Applied Physiology and Kinesiology	32*	U. of West Florida	MS – 2012	3.3	590, 620	N	N	N	N
2011	Applied Physiology and Kinesiology	33	Kapositrian University of Athens	MS – 2011		360, 490	N	N	N	N
2011	Applied Physiology and Kinesiology	34	National Taiwan Sport	MS – 2009		640, 800, 3	N	N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Applied Physiology and Kinesiology	35	Yonsei University	MS – 2011		760, 800, 2.5	N	N	N	N
2011	Clinical and Health Psychology	1*	Wake Forest	BA - 2011	3.10	530, 530, 4.5	N	N	N	N
2011	Clinical and Health Psychology	2	Emory University, Boston University	BA - 2006 MA - 2011	3.69	600, 730, 5	N	N	N	N
2011	Clinical and Health Psychology	3	U of Jordan, Boston University	BA - 2003 MA - 2009	2.97	450, 660, 4	Y	Y	Y	
2011	Clinical and Health Psychology	4*	Florida Atlantic University	BA - 2010	3.85	550, 530, 3	N	N	N	N
2011	Clinical and Health Psychology	5	U of Pittsburgh, Pepperdine	BA - 2005 MA - 2010	3.11	440, 650, 4.5	N	N	N	N
2011	Clinical and Health Psychology	6	Rutgers, New School for Social Research	BA - 2008 MA - 2010	2.60	410, 440, 2.5	N	N	N	N
2011	Clinical and Health Psychology	7*	U of California Davis	BS - 2011	3.21	530, 600, 5	N	N	N	N
2011	Clinical and Health Psychology	8	Towson , U of Hartford	BS - 2001 MA - 2005	3.70	560, 530, 5	N	N	N	N
2011	Clinical and Health Psychology	9	U of West Florida, Florida State	BA - 2007 MS - 2009	3.98	590, 660, 4	N	N	N	N
2011	Clinical and Health Psychology	10	Boston University	BA - 2009 MA - 2010	3.68	630, 640, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	11	U of Washington	BS - 2008	3.44	620, 770, 3.5	Y	N	N	N
2011	Clinical and Health Psychology	12*	San Diego State	BA - 2008	3.49	500, 610, 4	N	N	N	N
2011	Clinical and Health Psychology	13	Northwestern	BS - 2009	3.72	700, 670, 5	Y	N	N	N
2011	Clinical and Health Psychology	14	U of Maryland Baltimore County	BA - 2009	4.00	570, 660, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	15*	Temple	BS - 2010	3.67	360, 380, 4	N	N	N	N
2011	Clinical and Health Psychology	16	Florida State	BS - 2011	3.78	420, 600, 3	N	N	N	N
2011	Clinical and Health Psychology	17	Auburn	BA - 2011	3.89	590, 680, 5.5	N	N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Clinical and Health Psychology	18*	U of Pennsylvania	BA - 2010	2.70	590, 640, 3.5	N	N	N	N
2011	Clinical and Health Psychology	19	San Diego State	BA - 2010	3.80	640, 600, 4	N	N	N	N
2011	Clinical and Health Psychology	20	McGill University, Kent State University	BS - 2006 MA - 2009	3.38	430, 720, 3.5	N	N	N	N
2011	Clinical and Health Psychology	21	Northwestern	BA – 2011	3.95	590, 700, 5	N	N	N	N
2011	Clinical and Health Psychology	22	Tulane	BS - 2010	3.99	710, 600, 5	N	N	N	N
2011	Clinical and Health Psychology	23	Bryant University, Boston University	BA - 2008 MA - 2011	3.70	500, 600, 5	N	N	N	N
2011	Clinical and Health Psychology	24	College of Wooster	BA - 2011	3.90	550, 730, 4.5	N	N	N	N
2011	Clinical and Health Psychology	25	U of Dayton	BA - 2011	3.79	430, 620, 4	N	N	N	N
2011	Clinical and Health Psychology	26	Iowa State, Northern Arizona University	BS - 2007 MA -2011	3.90	640, 450, 4	N	N	N	N
2011	Clinical and Health Psychology	27	Denison University	BA - 2011	3.68	540, 540 ,5.5	N	N	N	N
2011	Clinical and Health Psychology	28	New York University	BA - 2009	3.70	550, 770, 4.5	N	N	N	N
2011	Clinical and Health Psychology	29*	Northwestern	BA - 2011	3.36	520, 750, 5	N	N	N	N
2011	Clinical and Health Psychology	30	Bowdoin College	BS - 2009	3.40	570, 700, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	31	U of Florida	BS - 2010	3.20	640, 730, 4	N	N	N	N
2011	Clinical and Health Psychology	32*	Xavier University of Louisiana	BS - 2011	3.90	540, 530, 4	N	N	N	N
2011	Clinical and Health Psychology	33	U of Florida, Nova Southeastern University	BS - 2006 MS - 2009	2.93	560, 720, 4.5	N	N	N	N
2011	Clinical and Health Psychology	34	Carnegie Mellon	BS - 2011	3.78	590, 770, 5.5	Y	N	N	N
2011	Clinical and Health Psychology	35*	U of Florida	BA - 2011	3.06	410, 520, 4	N	N	N	N

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2011	Clinical and Health Psychology	36*	U of Miami, Florida International University	BA - 1998 Ed.S - 2010	3.90	560, 730, 5	N	N	N	N
2011	Clinical and Health Psychology	37	U of North Carolina at Chapel Hill	BA - 2008	3.50	650, 800, 5.5	N	N	N	N
2011	Clinical and Health Psychology	38	St. John's University	BA - 2008 MA - 2011	3.70	460, 510, 4	N	N	N	N
2011	Clinical and Health Psychology	39	Virginia Tech	BS - 2011	3.15	620, 730, 5	N	N	N	N
2011	Clinical and Health Psychology	40	Temple	BA - 2008	3.88	620, 740, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	41	U of Durham	BS - 2011		480, 770, 4	N	N	N	N
2011	Clinical and Health Psychology	42	St. Olaf College	BA - 2011	3.69	680, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	43	Brigham Young University	BS;BA - 2010	3.70	510, 770, 5	Y	N	N	N
2011	Clinical and Health Psychology	44*	U of Richmond, Villanova	BS - 2003 MS - 2008	3.13	520, 570, 4	N	N	N	N
2011	Clinical and Health Psychology	45*	Florida State	BS - 2011	3.09	430, 620, 3.5	N	N	N	N
2011	Clinical and Health Psychology	46	U of Texas	BS - 2011	3.71	610, 700, 5	N	N	N	N
2011	Clinical and Health Psychology	47	North Georgia College & State University, Appalachian State	BS - 2008 MA - 2010	3.90	570, 680, 4	N	N	N	N
2011	Clinical and Health Psychology	48*	Wesleyan, Columbia	BA - 2005 MA - 2009	3.18	640, 610, 4.5	N	N	N	N
2011	Clinical and Health Psychology	49	Occidental College	BA - 2009	3.82	580, 690, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	50	Northeastern University	BA - 2008	3.45	500, 660, 4.5	N	N	N	N
2011	Clinical and Health Psychology	51	U of Pittsburgh	BS - 2011	3.39	550, 660, 4.5	N	N	N	N
2011	Clinical and Health Psychology	52	Auburn University at Montgomery	BS - 2009 MS - 2011	3.88	620, 600, 4	N	N	N	N
2011	Clinical and Health Psychology	53	Flagler College	BA - 2010	3.84	670, 680, 4.5	N	N	N	N

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2011	Clinical and Health Psychology	54*	U of South Florida	BA - 2008	3.82	580, 610, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	55*	U of Texas at Austin	BA - 2010	3.60	680, 620, 3.5	N	N	N	N
2011	Clinical and Health Psychology	56*	Florida International University	BA - 2010	3.70	520, 680, 4	N	N	N	N
2011	Clinical and Health Psychology	57	Iowa State	BS - 2011	3.80	610, 800, 4.5	N	N	N	N
2011	Clinical and Health Psychology	58	U of North Carolina Chapel Hill, Wake Forest	BS;BA - 2006 MS - 2011	3.18	620, 710, 5.5	N	N	N	N
2011	Clinical and Health Psychology	59	Christopher Newport University, Virginia Commonwealth University	BA -2006 MPH - 2008/2009	3.54	580, 690, 4.5	N	N	N	N
2011	Clinical and Health Psychology	60	Colorado State, U of Central Florida	BS - 2008 MA - 2011	3.97	630, 660, 4	N	N	N	N
2011	Clinical and Health Psychology	61	Georgia College and State University	BS - 2011	4.00	560, 700, 4	N	N	N	N
2011	Clinical and Health Psychology	62	U of Florida	BS - 2008	3.86	650, 730, 5	Y	N	N	N
2011	Clinical and Health Psychology	63	U of Northern Colorado	BA - 2011	3.94	610, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	64	U of Kansas, Augusta State University	BA - 2007 MS - 2011	2.75	470, 690, 4	N	N	N	N
2011	Clinical and Health Psychology	65*	Southeastern University, U of South Florida	BA - 2007 MA -2010	3.50	440, 660, 5	N	N	N	N
2011	Clinical and Health Psychology	66	Lipscomb	BS - 2010	3.98	640, 750, 4	N	N	N	N
2011	Clinical and Health Psychology	67	U of Maryland Baltimore County, Towson	BS - 2008 MA - 2011	3.16	630, 660, 4	N	N	N	N
2011	Clinical and Health Psychology	68	Providence College	BS;BA - 2008	3.50	570, 690, 5	Y	Y	Y	
2011	Clinical and Health Psychology	69	Central Connecticut State University	BA - 2004 MA - 2006	3.38	510, 510, 4	N	N	N	N
2011	Clinical and Health Psychology	70	U of Michigan	BA - 2011	3.92	730, 780, 5	Y	N	N	N
2011	Clinical and Health Psychology	71	Vanderbilt, U of Miami	BS - 2008 MS-2011	3.60	570, 610, 5	N	N	N	N

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2011	Clinical and Health Psychology	72	Hofstra University	BA - 2011	3.23	510, 710, 3.5	N	N	N	N
2011	Clinical and Health Psychology	73	Nyack College, Teachers College Columbia University	BA - 2007 MA - 2008	3.90	610, 700, 5	Y	Y	Y	
2011	Clinical and Health Psychology	74	U of Idaho	BS - 2010	3.90	470, 710, 4.5	N	N	N	N
2011	Clinical and Health Psychology	75*	U of Florida	BA - 2011	3.96	800, 730, 6	Y	Y	Y	
2011	Clinical and Health Psychology	76*	California State University- Northridge	BA - 2010	3.59	450, 470, 4.5	N	N	N	N
2011	Clinical and Health Psychology	77	U of Wisconsin	BS - 2009	4.00	530, 630, 4	N	N	N	N
2011	Clinical and Health Psychology	78	Smith College	BA - 2008	3.78	620, 660, 5.5	N	N	N	N
2011	Clinical and Health Psychology	79	Salem State University, Marywood University	BS - 2005 MS - 2010	3.60	510, 600, 5	N	N	N	N
2011	Clinical and Health Psychology	80	Oklahoma City University	BS - 2011	3.65	570, 750, 5.5	Y	Y	Y	
2011	Clinical and Health Psychology	81	U of Pittsburgh	BS - 2009	3.69	600, 590, 4.5	N	N	N	N
2011	Clinical and Health Psychology	82	U of California, San Diego	BA - 2009	3.24	540, 650, 4	N	N	N	Y
2011	Clinical and Health Psychology	83	U of Toronto	BS - 2008	3.08	600, 720, 4	N	N	N	N
2011	Clinical and Health Psychology	84	McGill University	BA - 2007	3.27	590, 680, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	85	Oregon State	BS -2011	3.80	550, 630, 5	N	N	N	N
2011	Clinical and Health Psychology	86	U of Kansas	BA - 2009	3.67	530, 750, 4	Y	N	N	N
2011	Clinical and Health Psychology	87	U of California Davis	BA - 2009	3.61	620, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	88	Cedarville University	BA - 2011	3.96	690, 760, 4.5	N	N	N	N

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2011	Clinical and Health Psychology	89	Wesleyan, Hunter College of the City University of New York	BA - 2001 MA - 2010	3.90	650, 610, 4.5	N	N	N	N
2011	Clinical and Health Psychology	90	Western Washington University	BA - 2011	3.56	430, 550, 4.5	N	N	N	N
2011	Clinical and Health Psychology	91	U of Iowa	BS - 2011	4.00	760, 680, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	92	U of Florida	BS - 2008	3.39	560, 710, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	93	Agnes Scott College	BA - 2011	3.76	730, 740, 5.5	N	N	N	N
2011	Clinical and Health Psychology	94*	U of Florida, Eastern Illinois University	BS - 2008 MA - 2011	3.37	550, 600, 4.5	N	N	N	N
2011	Clinical and Health Psychology	95	U of Florida, Loyola University Chicago	BS - 2008 MA - 2011	3.90	550, 670, 5.5	N	N	N	N
2011	Clinical and Health Psychology	96	U of Southern California	BS - 2011	3.90	680, 730, 5	N	N	N	N
2011	Clinical and Health Psychology	97	U of Michigan	BA - 2008	3.30	570, 520, 4.5	N	N	N	N
2011	Clinical and Health Psychology	98	U of New Mexico	BS - 2010	3.72	610, 660, 4	N	N	N	N
2011	Clinical and Health Psychology	99	U of California San Diego	BS - 2008	3.75	570, 630, 5	N	N	N	Y
2011	Clinical and Health Psychology	100	U of Nebraska-Lincoln	BA - 2011	3.96	590, 660, 5	N	N	N	N
2011	Clinical and Health Psychology	101*	U of Iowa	BS - 2011	3.09	530, 620, 4.5	N	N	N	N
2011	Clinical and Health Psychology	102	Virginia Tech	BS - 2011	3.94	620, 660, 5	Y	N	N	N
2011	Clinical and Health Psychology	103	Samford, Villanova	BA - 2007 MS - 2010	3.98	670, 630, 6	N	N	N	N
2011	Clinical and Health Psychology	104	The College of William & Mary	BS - 2011	3.38	590, 760, 4	N	N	N	N
2011	Clinical and Health Psychology	105*	U of Pittsburgh	BS - 2010	3.82	520, 690, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	106	Illinois State	BA - 2009	3.93	510, 650, 4	N	N	N	N

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2011	Clinical and Health Psychology	107	U of South Alabama		3.70	550, 630, 3.5	N	N	N	N
2011	Clinical and Health Psychology	108	U of Nebraska-Lincoln	BA - 2007	3.59	530, 600, 4.5	N	N	N	N
2011	Clinical and Health Psychology	109	San Diego State	BA - 2011	3.50	530, 590, 5	N	N	N	N
2011	Clinical and Health Psychology	110	Baruch College	BA - 2009	3.90	640, 610, 4	Y	N	N	N
2011	Clinical and Health Psychology	111	Georgia State	BS - 2009	3.43	520, 690, 3.5	N	N	N	N
2011	Clinical and Health Psychology	112	U of Florida, Auburn	BS - 2006 MS - 2010	3.03	520, 770, 4	N	N	N	N
2011	Clinical and Health Psychology	113	New York University, U of Michigan Ann Arbor	BA - 2003 MPH - 2009	3.80	480, 560, 5	Y	N	N	N
2011	Clinical and Health Psychology	114*	U of Miami	BS - 2009	3.00	530, 620, 3.5	N	N	N	N
2011	Clinical and Health Psychology	115	U of Alabama	BA - 2010	0.00	410, 330, 2.5	N	N	N	N
2011	Clinical and Health Psychology	116*	U of Pennsylvania	BA - 2009	3.15	680, 660, 3.5	Y	N	N	N
2011	Clinical and Health Psychology	117	U of Florida	BS - 2011	3.46	280, 490, 3	N	N	N	N
2011	Clinical and Health Psychology	118	U of Wisconsin-Milwaukee	BA - 2009	3.96	610, 670, 3.5	N	N	N	N
2011	Clinical and Health Psychology	119	Indiana University	BS - 2003 MPH - 2004	3.00	640, 610, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	120	Duke	BA - 2009	3.70	570, 630, 5	Y	N	N	N
2011	Clinical and Health Psychology	121	Florida State	BS - 2010	3.90	590, 700, 4.5	N	N	N	N
2011	Clinical and Health Psychology	122	Flagler College	BA - 2011	3.46	550, 540, 4	N	N	N	N
2011	Clinical and Health Psychology	123	The Catholic University of South Korea	BS - 2005 MS - 2008	3.58	590, 800, 3.5	N	N	N	N
2011	Clinical and Health Psychology	124	Boston University	BA - 2008	3.40	590, 670, 4.5	N	N	N	N

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2011	Clinical and Health Psychology	125	Claremont McKenna College, San Diego State	BA - 2001 MA - 2010	2.60	700, 700, 4.5	N	N	N	N
2011	Clinical and Health Psychology	126	Eastern Connecticut State University	BS - 2011	3.80	450, 440, 4	N	N	N	N
2011	Clinical and Health Psychology	127	D.G. Ruparel College, U of Mumbai	BA - 2000 MA - 2002	0.00	480, 630, 3.5	N	N	N	N
2011	Clinical and Health Psychology	128	Yale	BA - 2008	3.83	660, 800, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	129	U of Northern Colorado	BA - 2011	3.70	510, 630, 5	N	N	N	N
2011	Clinical and Health Psychology	130	Concordia University, Boston University	BA - 2006 MA - 2008	3.38	560, 660, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	131	Austin Peay State University	BS - 2010	3.87	530, 540, 4	N	N	N	N
2011	Clinical and Health Psychology	132	Central Connecticut State University	BA - 2009	3.77	660, 660, 4.5	N	N	N	N
2011	Clinical and Health Psychology	133	U of Maryland, Baltimore County	BS - 2009	3.38	530, 750, 5.5	N	N	N	N
2011	Clinical and Health Psychology	134	DePaul University, Roosevelt University	BA - 2005 MA - 2008	3.00	460, 610, 4	N	N	N	N
2011	Clinical and Health Psychology	135	Temple, San Diego State	BA - 2009 MS - 2011	3.64	510, 560, 3.5	N	N	N	N
2011	Clinical and Health Psychology	136	Auburn	BA - 2010	3.91	520, 740, 5	N	N	N	N
2011	Clinical and Health Psychology	137	Florida State	BS - 2009	3.50	510, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	138	U of Connecticut	BA - 2011	3.90	680, 700, 4.5	N	N	N	N
2011	Clinical and Health Psychology	139	U of Pennsylvania	BA - 2008	3.67	650, 720, 5	N	N	N	N
2011	Clinical and Health Psychology	140	Mount Holyoke College	BA - 2007	3.71	520, 650, 4.5	N	N	N	N
2011	Clinical and Health Psychology	141	Brandeis University, Columbia University	BA - 2008 MA - 2011	3.06	550, 660, 4	N	N	N	N
2011	Clinical and Health Psychology	142	U of Pittsburgh	BS - 2007	3.70	520, 520, 3.5	N	N	N	N

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2011	Clinical and Health Psychology	143	U of California Los Angeles	BA - 2006	3.70	730, 710, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	144	Calvin College	BA - 2010	3.81	490, 700, 4	N	N	N	N
2011	Clinical and Health Psychology	145	Tulane	BS - 2007 MS - 2009	3.77	510, 690, 4.5	N	N	N	N
2011	Clinical and Health Psychology	146	George Washington University, Columbia University	BA - 2008 MPH - 2011	3.40	510, 610, 3.5	N	N	N	N
2011	Clinical and Health Psychology	147	U of Minnesota	BA - 2010	0.00	560, 740, 3	N	N	N	N
2011	Clinical and Health Psychology	148	U of North Carolina	BA - 2011	4.00	710, 760, 5.5	Y	N	N	N
2011	Clinical and Health Psychology	149	Auburn	BA - 2010	3.57	420, 560, 5	N	N	N	N
2011	Clinical and Health Psychology	150	Bates College	BA - 2009	3.43	460, 730, 5	N	N	N	N
2011	Clinical and Health Psychology	151*	U of Florida	BS - 2009	3.66	600, 650, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	152	U of Central Florida	BS - 2011	3.45	610, 690, 4	N	N	N	N
2011	Clinical and Health Psychology	153	U of South Florida	BA - 2010	3.55	460, 590, 4	N	N	N	N
2011	Clinical and Health Psychology	154	Milligan College	BS - 2011	3.93	530, 780, 6	N	N	N	N
2011	Clinical and Health Psychology	155	San Diego State	BA - 2011	3.47	570, 570, 4	N	N	N	N
2011	Clinical and Health Psychology	156	State University of New York at Stony Brook	BA - 2011	3.70	530, 800, 4.5	N	N	N	N
2011	Clinical and Health Psychology	157*	U of Florida	BS - 2010	3.40	490, 710, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	158*	U of South Carolina	BA - 2011	3.65	300, 270, 4	N	N	N	N
2011	Clinical and Health Psychology	159	Texas A&M	BS - 2011	4.00	550, 740, 5.5	N	N	N	N
2011	Clinical and Health Psychology	160	Baruch College, Touro College	BA - 2005 MS - 2008	3.84	710, 720, 5	N	N	N	N

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2011	Clinical and Health Psychology	161	U of Wisconsin Milwaukee	BA - 2007 MS - 2011	3.75	590, 710, 5	Y	N	N	N
2011	Clinical and Health Psychology	162	Interdisciplinary Center Israel	BA - 2010	82.90	340, 660, 3.5	N	N	N	N
2011	Clinical and Health Psychology	163	Hanover College	BA - 2011	3.84	600, 720, 4	Y	N	N	N
2011	Clinical and Health Psychology	164	Duke	BS - 2009	3.94	750, 800, 5	Y	N	N	N
2011	Clinical and Health Psychology	165	James Madison	BA - 2009 MA - 2011	3.50	480, 620, 4	N	N	N	N
2011	Clinical and Health Psychology	166	George Washington	BA - 2009	3.65	560, 780, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	167	Boston University	BA - 2008	3.28	620, 710, 5	N	N	N	N
2011	Clinical and Health Psychology	168	U of Florida	BS - 2010	3.78	550, 500, 4.5	N	N	N	N
2011	Clinical and Health Psychology	169	U of Florida	BS - 2011	3.80	620, 740, 5	N	N	N	N
2011	Clinical and Health Psychology	170	U of Tennessee at Chattanooga	BS - 2011	3.97	580, 710, 5	N	N	N	N
2011	Clinical and Health Psychology	172	Missouri University of Science & Technology	BA - 2011	4.00	540, 470, 4	N	N	N	N
2011	Clinical and Health Psychology	173	Purdue, The Chicago School of Professional Psychology	BA - 2008 MA - 2011	3.12	550, 650, 5	N	N	N	N
2011	Clinical and Health Psychology	174	Stanford	BA - 2009	3.94	710, 770, 5	Y	N	N	N
2011	Clinical and Health Psychology	175*	Penn State	BS - 2007	3.55	610, 750, 3.5	N	N	N	N
2011	Clinical and Health Psychology	176	Florida Atlantic University	BA - 2010	0.00	480, 320, 3.5	N	N	N	N
2011	Clinical and Health Psychology	177	U of Florida, Columbia University	BS - 2008 MA - 2010	0.00	330, 570, 4.5	N	N	N	N
2011	Clinical and Health Psychology	178	U of Central Florida	BS - 2011	3.75	560, 790, 5	N	N	N	N
2011	Clinical and Health Psychology	179	Colgate University	BA - 2007	3.17	530, 760, 5	N	N	N	N

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2011	Clinical and Health Psychology	180	Bowling Green State University	BA - 2006 MA - 2010	3.59	600, 740, 5	N	N	N	N
2011	Clinical and Health Psychology	181	Lewis & Clark College	BS - 2010	3.74	580, 640, 5	N	N	N	N
2011	Clinical and Health Psychology	182	U of Florida	BS - 2009	4.00	540, 620, 4.5	N	N	N	N
2011	Clinical and Health Psychology	183	Loyola University New Orleans	BA - 2009	3.80	560, 510, 5	N	N	N	N
2011	Clinical and Health Psychology	184	Hope College	BA - 2011	3.81	570, 770, 5	N	N	N	N
2011	Clinical and Health Psychology	185	U of North Carolina at Chapel Hill	BA - 2008	3.78	610, 720, 5	Y	N	N	N
2011	Clinical and Health Psychology	186	St. Xavier's College India, U of Baroda	BA - 2009 MA - 2011	3.80	500, 710, 4	N	N	N	N
2011	Clinical and Health Psychology	187	U of Florida	BS - 2011	3.08	390, 460, 4	N	N	N	N
2011	Clinical and Health Psychology	188	U of California San Diego	BS - 2009	3.63	630, 760, 4.5	N	N	N	N
2011	Clinical and Health Psychology	189	Michigan State	BS - 2011	3.54	460, 760, 4.5	N	N	N	N
2011	Clinical and Health Psychology	190	U of Florida	BS - 2010	3.69	490, 570, 4.5	N	N	N	N
2011	Clinical and Health Psychology	191	U of Massachusetts Amherst	BS - 2007	3.57	660, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	192	U of South Florida	BA - 2008	3.58	500, 600, 4	N	N	N	N
2011	Clinical and Health Psychology	193	Troy	BS - 2011	3.80	480, 550, 3.5	N	N	N	N
2011	Clinical and Health Psychology	194	U of North Carolina at Chapel Hill	BA - 2008	3.54	760, 740, 4	N	N	N	N
2011	Clinical and Health Psychology	195	Princeton, U of Minnesota	BA - 2007 MA - 2011	3.68	740, 770, 5.5	N	N	N	N
2011	Clinical and Health Psychology	196	Bates College	BA - 2009	3.67	630, 750, 5	Y	N	N	N
2011	Clinical and Health Psychology	197	Tulsa University	BS - 2011	3.50	540, 590, 5	Y	N	N	N

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2011	Clinical and Health Psychology	198	U of California San Diego	BS;BA - 2009	0.00	580, 800, 4.5	N	N	N	N
2011	Clinical and Health Psychology	199	U of Texas at Austin	BS - 2009	3.63	630, 710, 4.5	N	N	N	N
2011	Clinical and Health Psychology	200*	U of Florida	BS; BA - 2010	3.81	510, 590, 4.5	N	N	N	N
2011	Clinical and Health Psychology	201	Florida International University	BA - 2010	2.78	360, 520, 2.5	N	N	N	N
2011	Clinical and Health Psychology	202	U of Florida	BA - 2010	3.59	630, 640, 3	N	N	N	N
2011	Clinical and Health Psychology	203	U of Florida	BS - 2008 M.Ed - 2010	3.82	570, 720, 4.5	N	N	N	N
2011	Clinical and Health Psychology	204	U of Central Florida	BS -2010	3.86	570, 730, 4.5	N	N	N	N
2011	Clinical and Health Psychology	205*	Arizona State	BS -2010	3.75	600, 600, 4	N	N	N	N
2011	Clinical and Health Psychology	206	Rutgers	BA - 2009	3.69	530, 660, 4.5	N	N	N	N
2011	Clinical and Health Psychology	207	Eastern Connecticut State University	BS - 2010	3.63	460, 720, 4.5	N	N	N	N
2011	Clinical and Health Psychology	208	U of Memphis	BA - 2010	3.65	580, 680, 4	N	N	N	N
2011	Clinical and Health Psychology	209	U of Miami	BA -2011	3.80	610, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	210	Gettysburg College, Loyola University Maryland	BA - 2008 MS - 2010	3.34	580, 600, 4.5	N	N	N	N
2011	Clinical and Health Psychology	211*	Clark Atlanta University, Pepperdine	BA - 2009 MA - 2011	3.63	350, 300, 3.5	N	N	N	N
2011	Clinical and Health Psychology	212*	U of St. Thomas	BA - 2007	3.15	730, 660, 4.5	N	N	N	N
2011	Clinical and Health Psychology	213	U of Nebraska-Lincoln	BA - 2010	3.90	550, 680, 4.5	N	N	N	N
2011	Clinical and Health Psychology	214	James Madison, The Catholic University of America	BS - 2007 MA - 2009	3.72	580, 650 ,4	N	N	N	N
2011	Clinical and Health Psychology	215	U of Alabama	BS - 2002	3.32	530, 630, 4	N	N	N	N

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2011	Clinical and Health Psychology	216	Appalachian State	BS - 2011	3.80	470, 610, 4	N	N	N	N
2011	Clinical and Health Psychology	217	Central Michigan University	BS - 2010	3.75	580, 800, 4.5	N	N	N	N
2011	Clinical and Health Psychology	218*	U of Michigan	BA - 2008	3.40	630, 630, 4.5	N	N	N	N
2011	Clinical and Health Psychology	219	Indiana University	BA - 2008	3.27	570, 700, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	220*	Baylor University	BA - 2009	3.71	560, 720, 3.5	N	N	N	N
2011	Clinical and Health Psychology	221	U of Vermont	BS - 2009	2.71	560, 540, 3.5	N	N	N	N
2011	Clinical and Health Psychology	222	Catholic University of America	BA - 2005	3.39	610, 610, 5	N	N	N	N
2011	Clinical and Health Psychology	223	U of Florida	BS - 2011	3.68	580, 740, 5.5	Y	Y	Y	
2011	Clinical and Health Psychology	224*	Florida International University	BS - 2010	3.63	400, 580, 3.5	N	N	N	N
2011	Clinical and Health Psychology	225	Brigham Young University	BS - 2008 MS - 2011	3.64	620, 780, 5.5	N	N	N	N
2011	Clinical and Health Psychology	226	The College of William & Mary	BS - 2010	3.72	630, 700, 5	N	N	N	N
2011	Clinical and Health Psychology	227	Notre Dame	BA - 2007	3.38	650, 660, 4	N	N	N	N
2011	Clinical and Health Psychology	228	U of Central Florida, Wake Forest	BS - 2006 MA - 2008	3.78	580, 650, 4	Y	Y	Y	
2011	Clinical and Health Psychology	229	Pomona College	BA - 2009	3.85	570, 730, 5	N	N	N	N
2011	Clinical and Health Psychology	230*	U of Florida, American University Washington DC	BA - 2008 MA - 2010	2.98	490, 590, 3.5	N	N	N	N
2011	Clinical and Health Psychology	231	Mills College	BA - 2011	4.00	760, 600, 5.5	Y	N	N	N
2011	Clinical and Health Psychology	232*	U of Central Florida	BS - 2010	3.77	440, 640, 4	N	N	N	N
2011	Clinical and Health Psychology	233*	U of California Berkeley	BA - 2009	3.93	750, 530, 5	N	N	N	N

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2011	Clinical and Health Psychology	234*	Pontificia Universidad Javeriana	BA - 2006	4.58	510, 660, 5	N	N	N	N
2011	Clinical and Health Psychology	235	U of Florida	BS - 2011	4.00	640, 750, 4.5	N	N	N	N
2011	Clinical and Health Psychology	236	U of California Riverside	BA - 2010	3.88	580, 680, 4	N	N	N	N
2011	Clinical and Health Psychology	237	South Dakota State	BS - 2010	4.00	690, 650, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	238	U of South Florida	BA - 2009	3.68	420, 510, 4.5	N	N	N	N
2011	Clinical and Health Psychology	239	U of St. Thomas	BA - 2009	3.87	590, 710, 5	Y	N	N	N
2011	Clinical and Health Psychology	240*	Oakwood University	BS - 2010	0.00	440, 550	N	N	N	N
2011	Clinical and Health Psychology	241*	U of Virginia, Virginia Commonwealth University School of Medicine	BA - 2008 MPH - 2010	2.60	490, 710, 5	N	N	N	N
2011	Clinical and Health Psychology	242	U of Pennsylvania	BA - 2009	3.52	710, 780, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	243	U of Rochester	BS;BA - 2011	3.71	620, 650, 4.5	N	N	N	N
2011	Clinical and Health Psychology	244	Claremont McKenna College	BA - 2010	3.75	510, 650, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	245	U of Cincinnati	BA - 2008	3.56	450, 610, 4.5	N	N	N	N
2011	Clinical and Health Psychology	246	U of Central Florida	BS - 2010	3.80	460, 600, 3.5	N	N	N	N
2011	Clinical and Health Psychology	247	U of Florida	BS - 2011	3.70	480, 630, 4	N	N	N	N
2011	Clinical and Health Psychology	248	U of Delaware	BS - 2009	3.40	570, 740, 4.5	N	N	N	Y
2011	Clinical and Health Psychology	249	U of Missouri-Columbia	BA - 2011	3.90	570, 590, 5	N	N	N	N
2011	Clinical and Health Psychology	250	Iowa State	BS - 2010	3.84	370, 460, 2.5	N	N	N	N
2011	Clinical and Health Psychology	251	Elon University, Ball State	BA - 2009 MA - 2011	3.68	590, 590, 5	N	N	N	N

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2011	Clinical and Health Psychology	252	Baylor, U of Texas at Dallas	BA - 2004 MS - 2010	3.02	550, 680, 5	N	N	N	N
2011	Clinical and Health Psychology	253	Florida Institute of Technology	BS - 2007	3.96	700, 610, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	254	Northwestern	BA - 2010	3.66	620, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	255	California State University, East Bay San Jose State University	BA - 2005 MA - 2009	3.38	550, 550, 3.5	N	N	N	N
2011	Clinical and Health Psychology	256	Union College	BS -2010	3.50	560, 790, 4	N	N	N	N
2011	Clinical and Health Psychology	257	U of Kentucky	BA - 2007	3.97	500, 620, 4	N	N	N	N
2011	Clinical and Health Psychology	258	Rollins College, Missouri State University	BA - 2002 MS - 2011	3.90	660, 660, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	259	U of Iceland	BS - 2010	3.20	640, 480, 4	N	N	N	N
2011	Clinical and Health Psychology	260	U of Rhode Island	BA - 2007	3.60	490, 690, 4.5	N	N	N	N
2011	Clinical and Health Psychology	261	Drexel University	BS - 2009	3.90	580, 740, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	262	Central Michigan University	BS - 2007 MS - 2009	3.83	540, 650, 5	N	N	N	N
2011	Clinical and Health Psychology	263	New York University	BA - 2009	3.64	640, 690, 5	N	N	N	N
2011	Clinical and Health Psychology	264*	U of South Florida	BA - 2009	2.99	640, 650, 5	N	N	N	N
2011	Clinical and Health Psychology	265*	U of Florida	BS - 2010	3.42	370, 630, 4	N	N	N	N
2011	Clinical and Health Psychology	266	Guilford College	BA - 2010	3.39	580, 630, 5.5	N	N	N	N
2011	Clinical and Health Psychology	267	Auburn	BA;BS - 2010	3.67	620, 730, 4.5	N	N	N	N
2011	Clinical and Health Psychology	268	Wake Forest	BA - 2010	3.69	570, 640, 4.5	N	N	N	N
2011	Clinical and Health Psychology	269	U of Tennessee, U of Florida	BA - 1997 MS - 2010	3.95	500, 670, 5.5	N	N	N	N

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2011	Clinical and Health Psychology	270	U of California Irvine	BA 2010	3.70	580, 640, 4.5	N	N	N	N
2011	Clinical and Health Psychology	271*	U of Florida	BS - 2011	3.93	510, 650, 4	N	N	N	N
2011	Clinical and Health Psychology	272	U of North Texas	BS - 2009	4.00	600, 690, 4.5	Y	Y	Y	
2011	Clinical and Health Psychology	273	U of California Irvine	BA - 2009	3.40	560, 630, 4.5	N	N	N	N
2011	Clinical and Health Psychology	274	Clemson, U of South Carolina Wilmington	BA - 2008 MS - 2011	3.23	490, 610, 3.5	N	N	N	N
2011	Clinical and Health Psychology	275	U of Florida, Teachers College Columbia University	BS - 2008 MA - 2011	3.84	430, 560, 4	N	N	N	N
2011	Clinical and Health Psychology	276*	Michigan Technological University	BS - 2010	3.67	380, 450, 4	N	N	N	N
2011	Clinical and Health Psychology	277*	U of South Florida	BS - 2009	3.90	520, 710, 4.5	N	N	N	N
2011	Clinical and Health Psychology	278*	National-Louis University, Palo Alto University	BA - 1991 MA - 2010	3.69	710, 730, 4.5	N	N	N	N
2011	Clinical and Health Psychology	279	Ohio State University	BS - 2011	3.88	640, 660, 4.5	N	N	N	N
2011	Clinical and Health Psychology	280	George Washington University	BA - 2008	3.99	680, 720, 6	Y	N	N	N
2011	Clinical and Health Psychology	281	U of Connecticut	BA - 2009	3.81	610, 620, 4	N	N	N	N
2011	Clinical and Health Psychology	282*	Southern Polytechnic State University	BA - 2010	3.70	590, 690, 4.5	Y	N	N	N
2011	Clinical and Health Psychology	283	Ohio Western University	BA - 2010	3.74	610, 730, 4	N	N	N	N
2011	Clinical and Health Psychology	284	Northern Illinois University	BS - 2007	3.50	470, 620, 4	N	N	N	N
2011	Clinical and Health Psychology	285	Rollins College	BA - 2011	3.75	690, 690, 4	N	N	N	N
2011	Clinical and Health Psychology	286*	U of Maryland University College	BS - 2011	3.50	610, 490 3.5	N	N	N	N
2011	Clinical and Health Psychology	287	State University of New York at Stony Brook	BS - 2011	3.75	570, 690, 5.5	N	N	N	N

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2011	Clinical and Health Psychology	288	U of Florida	BS - 2010	3.50	670, 670, 5.5	Y	Y	Y	
2011	Clinical and Health Psychology	289	U of Connecticut	BA - 2009	3.92	590, 690, 4	Y	N	N	N
2011	Clinical and Health Psychology	290	U of Michigan, Wayne State University	BA - 2008 MS - 2011	2.86	540, 630, 5	N	N	N	N
2011	Clinical and Health Psychology	291	U of California San Diego	BS - 2009	3.95	610, 790, 5	N	N	N	N
2011	Clinical and Health Psychology	292*	U of Kansas	BA - 2011	3.90	570, 720, 4.5	N	N	N	N
2011	Clinical and Health Psychology	293*	San Diego State	BA – 2011	3.59	450, 560, 4.0	N	N	N	N
2011	Health Services Research Management and Policy	1	U. of Central Florida	BS – 2007	3.90	480, 670, 3.5	N/A	Y	N	N
2011	Health Services Research Management and Policy	2*	Spring Arbor University, Michigan State University	BA – 2008 MPH – 2010	3.10	230, 320, 2.5	N/A	Y	Y	
2011	Health Services Research Management and Policy	3	Ohio State University	BA – 2009 MA – 2011	3.90	400, 470, 3.5	N/A	N	N	N
2011	Health Services Research Management and Policy	4	U. of Alaska, Baylor University	BA – 2000 MHA – 2008	3.70	450, 600, 3.0	N/A	Y	Y	
2011	Health Services Research Management and Policy	5*	U. of Mumbai, U. of Houston	BA – 2009 MA – 2011	3.30	590, 700, 3.5	N/A	N	N	N
2011	Health Services Research Management and Policy	6	Gallaudet University, California State University	BA – 1998 MA – 2001	3.80	430, 470, 3.0	N/A	N	N	N
2011	Health Services Research Management and Policy	7*	Paraguay	1996	3.80	390, 500	N/A	Y	Y	
2011	Health Services Research Management and Policy	8*	Indira Ghandi National University	BA – 2002		400, 630, 3.5	N/A	N	N	N
2011	Health Services Research Management and Policy	9	U. of California, Berkeley	BA – 2007	3.00	640, 700, 4.5	N/A	N	N	N
2011	Health Services Research Management and Policy	10	Wuhan Bioengineering University, East Tennessee State University	BA – 2009 MA – 2011	3.50	500, 780, 3.0	N/A	N	N	N
2011	Health Services Research Management and Policy	11	U. of Florida	BA – 2005	3.60	540, 710, 4.5	N/A	Y	Y	
2011	Health Services Research Management and Policy	12	Azad University, Brandeis University	BA – 2005 MA – 2010		280, 530, 3.0	N/A	N	N	N

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2011	Health Services Research Management and Policy	13	U. of California, Berekley, Yale University	BS – 2005 MA – 2007	3.30		N/A	Y	Y	
2011	Health Services Research Management and Policy	14*	Baba Farid University, U. of Florida	BA – 2003 MPH – 2011	3.30	500, 530, 3.5	N/A	N	N	N
2011	Health Services Research Management and Policy	15*	Hampton University, Meharry Medical College	BS – 1996 MS – 2001			N/A	N	N	N
2011	Health Services Research Management and Policy	16	U. of Bucharest	BA – 1998		450, 730	N/A	N	N	N
2011	Health Services Research Management and Policy	17	U. of Chicago	BA – 1997	3.30	660, 800, 4.5	N/A	Y	N	N
2011	Health Services Research Management and Policy	18*	U. of Florida	BS – 2006	3.10	530, 690, 3.5	N/A	N	N	N
2011	Health Services Research Management and Policy	19	Southwest University of China, Fujihan Medical Center	BA – 2006 MA – 2011		480, 770, 3.0	N/A	N	N	N
2011	Health Services Research Management and Policy	20	Beijing Institute of Technology, Vanderbilt	BA – 2009 MA – 2011		740, 800, 3.5	N/A	Y	N	N
2011	Health Services Research Management and Policy	21	Busan National University, Emory University	BA – 1993 MA – 2011		460, 720, 2.5	N/A	N	N	N
2011	Health Services Research Management and Policy	22	U. of Florida	BS – 1996 MS – 2003		600, 780	N/A	Y	Y	
2011	Health Services Research Management and Policy	23	Beijing Normal University	BA – 2008 MA – 2011		400, 800, 3.0	N/A	N	N	N
2011	Interdisciplinary Program in Biomedical Sciences	1	Handong Global University	BS – 2011		330, 770	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	2	Florida Gulf Coast University	BS – 2011	3.98	430, 800	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	3	Morgan State University	BS – 2011	3.93	450, 710	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	4	U. of Florida	BS – 2011	3.53	500, 760	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	5	U. of Alabama, Birmingham	BS – 2011	3.45	480, 620	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	6	Miami University, OH	BS – 2003		410, 670	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	7	Hillsdale College	BS – 2010	3.49	500, 630	Y	Y	Y	

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2011	Interdisciplinary Program in Biomedical Sciences	8	Georgia Tech	BS – 2011	2.93	650, 740	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	9	North Carolina Central University	BS – 2011	4.0	460, 580	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	10	U. California, Davis	BS – 2008	3.40	500, 780	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	11	Istanbul University	BS – 2007		390, 800	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	12	Notre Dame	BS – 2007	3.50	680, 740	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	13	U. of Florida	BS – 2009	3.32	540, 570	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	14	U. of Florida	BS – 2006	2.93	660, 670	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	15	National Taiwan Normal University	BS – 2007	3.60	630, 790	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	16	U. of Florida	BS – 2010	3.75	610, 720	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	17	Agnes Scott College	BA – 2009	3.48	540, 760	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	18	Gannon University	BS – 2005	3.98	580, 680	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	19	Randolph Macon Woman's College	BS – 2011	3.32	460, 750	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	20	Texas A & M	BS – 2011	3.89	510, 690	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	21	U. of Louisiana at Monroe,	BS – 2009	3.64	460, 750	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	22	Vanderbilt	BA – 2009	3.68	580, 720	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	23	U. of Florida	BS – 2006	3.56	580, 560	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	24	Texas A & M	BS – 2009	3.61	550, 650	Y	Y	Y	

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2011	Interdisciplinary Program in Biomedical Sciences	25	Fudan University	BS – 2009		510, 790	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	26	Anna Maria College	BS – 2009	3.62	570, 700	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	27	Saint Joseph's College	BS – 2009	3.75	440, 550	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	28	U. of California, Davis	BS – 2007	2.83	650, 690	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	29	Florida Atlantic University	BS – 2010	3.60	600, 520	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	30	U. of Illinois Urbana-Champaign	BS – 2011	3.60	620, 600	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	31	U. of Florida	BS – 2008	3.97	620, 790	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	32	Haverford College	BA – 2007	3.53		Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	33	U. of Phillipines	BS – 2002		440, 750	Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	34	Boston University	BS – 2009	3.69		Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	35	Florida International University	BS – 2009	3.93		Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	36	U. of South Florida	BS – 2009	3.24		Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	37	Harvard	MS – 2009	3.81		Y	Y	Y	
2011	Interdisciplinary Program in Biomedical Sciences	38	Shanghai Jiao Tong University	BS – 2008		570, 800	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	39	Nankai University	BS – 2011		620, 800	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	40	U. of North Carolina	BS – 2011	3.01	540, 770	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	41	Sastra University	BS – 2009		610, 790	Y	Y	N	

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2011	Interdisciplinary Program in Biomedical Sciences	42	Korea University	BS – 2007		680, 800	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	43	National Taiwan Normal University	BS – 2007	3.95	720, 800	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	44	U. of Texas of the Permian Basin	BS – 2010	3.70	500, 650	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	45	Texas A & M	BS – 2011	4.0	660, 730	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	46	California State University, Long Beach	BS – 2008	3.38	550, 550	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	47	U. of Florida	BS – 2011	3.31	520, 720	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	48	U. of Kansas	BS – 2011	3.20	480, 720	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	49	Baylor University	BS – 2011	4.0	570, 740	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	50	Pohang University of Science & Technology	BS – 2011		630, 790	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	51	National Taiwan Normal University	BS – 2010		640, 790	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	52	U. of Pittsburgh	BS – 2011	3.40	490, 720	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	53	U. of North Carolina, Wilmington	BS – 2008	3.46	430, 640	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	54	Davidson College	BS – 2009	3.60	610, 710	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	55	U. of New Hampshire	BS – 2008	3.12	630, 740	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	56	Boston University	BS – 2010	3.00	420, 620	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	57	U. of Central Florida	BS – 2011	3.60	640, 640	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	58	U. of Florida	BS – 2010	3.50	440, 710	Y	Y	N	

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2011	Interdisciplinary Program in Biomedical Sciences	59	U. of California Berkeley	BS – 2010	3.37	630, 800	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	60	Georgia Southern University	BS – 2011	3.90	680, 770	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	61	California State University, Chico	BS – 2007	3.40	460, 720	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	62	U. of the Sciences in Philadelphia	BS – 2006	2.85	490, 650	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	63	Rutgers	BS – 2011	3.84	340, 670	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	64	U. of Illinois Urbana-Champaign	BS – 2009	3.30	620, 650	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	65	Macalester College	BS – 2009	3.50	530, 660	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	66	Syracuse	BS – 2005	3.38	560, 660	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	67	Florida State University	BS – 2011		500, 640	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	68	College of Charleston	BS – 2011	3.49	470, 630	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	69	U. of California, Davis	BS – 2008	3.30	530, 710	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	70	St. Michael's College	BS – 2011	3.80	610, 600	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	71	Seton Hill College	BS – 2009	3.80	430, 620	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	72	Florida International University	BS – 2010	3.60	390, 620	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	73	Saint Petersburg State Medical University	BMed – 2008		550, 700	Y	Y	N	
2011	Interdisciplinary Program in Biomedical Sciences	74	Xiamen University	BS – 2011		580, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	75	Sichuan University	BS – 2008		600, 800	Y	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	76	Nankai University	BS – 2011		620, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	77	Shandong University	BS – 2011		560, 740	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	78	Zhejiang University	BS – 2011	3.69	490, 790	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	79	Zhong University	BS – 2008	3.44	580, 770	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	80	Wuhan University	BS – 2001		610, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	81	Nankai University	BS – 2011		660, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	82	Wuhan University	BS – 2010		580, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	83	Florida Institute of Technology	BS – 2005	3.62	450, 560	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	84	Vellore Institute of Technology	BS – 2009		680, 740	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	85	South China University of Technology	BS – 2006	2.80	480, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	86	U. of California, Davis	BS – 2010	3.63	530, 720	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	87	Berry College	BS – 2009	3.41	530, 720	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	88	Taipei Medical University	BMed		580, 780	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	89	U. of Central Florida	BS – 2011	3.70	420, 680	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	90	Haigazian University	BS – 2008		650, 690	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	91	Barry University	BS – 2011	3.30	410, 680	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	92	U. of California, Davis	BS – 2009	3.20	520, 700	Y	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	93	Tunghai University	BS – 2005		600, 730	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	94	Florida State University	BS – 2008	3.10	460, 610	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	95	U. of Arizona	BS – 2011	3.20	400, 610	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	96	R. D. National College	BS – 2008		560, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	97	U. of California, Davis	BS – 2006	3.36	750, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	98	Kyungsung University	BS – 2009	3.18	700, 790	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	99	Hanyang University	BS – 2008		670, 730	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	100	U. of Tennessee, Martin	BS – 2010	3.50	560, 710	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	101	U. of Florida	BS – 2011	3.40	430, 650	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	102	U. of Florida	BS – 2007		480, 700	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	103	Tehran University of Medical Sciences	BMed		390, 730	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	104	Institute of Chemical Technology	BS – 2009		600, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	105	East Michigan University	BS – 2011	3.95	490, 690	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	106	Jilin University	BS – 2010		660, 790	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	107	U. of Mumbai	BS – 2008		330, 720	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	108	U. of Dallas	BS – 2011	3.70	620, 710	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	109	Wooster	BA – 2010	3.00	580, 720	Y	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	110	Florida Gulf Coast University	BS – 2010	3.91	320, 740	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	111	Eastern Kentucky University	BS – 2011	3.51	530, 630	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	112	Keuka College	BS – 2011	3.67	470, 710	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	113	California State University, Northridge	BS – 2007	3.66	430, 780	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	114	West Bengal University of Health Sciences	BMed		750, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	115	U. of Nebraska, Lincoln	BS – 2009	3.87		Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	116	Chung Shan Medical University	BS – 2008		620, 800	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	117	Kuman University	BS – 2005		660, 700	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	118	Maharashtra Institute of Medical Education	BS – 2003		710, 770	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	119	U. of North Florida	BA – 2002	3.33	550, 450	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	120	U. of Florida	BS – 2011	3.40	430, 590	Y	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	121	U. of Tehran	BS – 2007		360, 720	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	122	Catawba College	BS – 2011	3.48	550, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	123	U. of Mumbai	BS – 2008		630, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	124	Utah State University	BS – 2008	2.10	530, 540	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	125	Hunan Normal University	BS – 2007		670, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	126	U. of Colorado, Colorado Springs	BS – 2011	3.15	380, 580	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	127	U. of Florida	BS – 2000		510, 660	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	128	Missouri Western State College	BS – 2011	3.17	560, 640	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	129	Wuhan University	BS – 2010		520, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	130	China Agricultural University	BS – 2010		470, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	131	Worcester Polytechnic Institute	BS – 2011	3.42	420, 580	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	132	U. of Missouri, Columbia	BS – 2007	3.70	510, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	133	Zhengzhou University	BS – 2009	2.80	490, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	134	U. of Miami, FL	BA – 2007	3.68	520, 530	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	135	Colorado State University	BS – 2010	3.75	500, 650	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	136	Anna University	BS – 2010		530, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	137	Qingdao University	BS – 2011		530, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	138	Central South University	BS – 2008		540, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	139	Guru Gobind Singh Indraprastha University	BS – 2005		490, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	140	Sastra University	BS – 2011		580, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	141	Nankai University	BS – 2011		510, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	142	National Tsing Hua University	BS - 2009		450, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	143	China Pharmaceutical University	BS – 2010		470, 790	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	144	Hanyang University	BS – 2008		530, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	145	Sri Venkateswara College	BS – 2011		490, 710	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	146	Kansas State University	BS – 2011		400, 630	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	147	Zhejiang University	BS – 2009	3.61	470, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	148	Shandong Medical University	BS – 2011		580, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	149	Towson State University	BS – 2009	3.43	460, 600	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	150	Shandong Medical University	BS – 2010		480, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	151	St. Xavier's College	BS – 2010		670, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	152	San Diego State University	BS – 2006	3.51	530, 550	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	153	Hampden-Sydney College	BS – 1991	3.13	690, 730	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	154	National Yang-Ming University	BS – 2005		700, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	155	Northwestern State University of Louisiana	BS – 2009	3.60	520, 580	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	156	U. of Wisconsin, River Falls	BS – 2008		580, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	157	U. of Houston	BMed – 2009	2.61	430, 660	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	158	Hebei Medical Collage	BS – 2011		520, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	159	Northeast Norman University	BS – 2009		530, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	160	Universidad del Valle	BS – 2011		330, 720	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	161	Huazhong University of Science & Technology	BS – 2011		440, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	162	Nanyang Technological University	BS – 2011		570, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	163	U. of Missouri, Columbia	BS – 2008	2.30	540, 660	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	164	Chhatrapati Shahuji Mahara University	BS – 2006		230, 460	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	165	Texas A&M University, Corpus Christi	BS – 2009		480, 320	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	166	Rhodes College	BS – 2007		640, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	167	U. of South Florida	BS – 2010	3.30	560, 595	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	168	Nankai University	MS – 2011		610, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	169	Osmania University	BS – 2010		440, 670	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	170	Huazhong University of Science & Technology	BS – 2010		520, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	171	Shandong Medical University	BS – 2011		560, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	172	St. Xavier's College	BS – 2009		600, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	173	National Institute of Technology	BS – 2011		500, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	174	Universidad Nacional Autonoma de Honduras	BS – 2009		300, 430	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	175	Glasgow University	BS – 2010		390, 480	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	176	Shandong Medical University	BS – 2007	3.64	590, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	177	Wuhan University	BS – 2007		730, 800	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	178	Jaypee Institute of Information Technology University	BS – 2010		430, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	179	Florida State University	BS – 2009	3.20	520, 670	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	180	Wuhan University	BS – 2011		580, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	181	Inner Mongolia University	BS – 2010		480, 700	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	182	Nankai University	BS – 2011		570, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	183	Alcorn State University	BS – 2007	3.40	340, 470	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	184	Adhiyamaan Engineering College	BS – 2011		540, 730	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	185	King Abdul Aziz University	BS – 1998		280, 680	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	186	Harbin Institute of Technology	BS – 2003		470, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	187	Peking Union Medical College	BS – 2011		640, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	188	Grove City College	BS – 2011	3.16	540, 690	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	189	Mary Washington College	BS – 2008	2.70	570, 660	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	190	Nankai University	BS – 2011		620, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	191	Florida Atlantic University	BS – 2011	3.50	670, 690	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	192	Kazakh State University	BS – 2004	3.87	670, 600	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	193	National Yang-Ming University	BS – 2009	3.36	410, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	194	Kon Kuk University	BS – 2010		410, 720	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	195	U. of Florida	BS – 2011	3.78	520, 660	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	196	University of Medicine and Pharmacy			380, 490	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	197	SUNY Plattsburg	BS – 2011	3.30	530, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	198	East China Normal University	BS – 2011		280, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	199	Mount Vernon Nazarene College	BS – 2011	3.50	450, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	200	China Agricultural University	BS – 2011	3.57	560, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	201	Bharathidasan University	BS – 2005		500, 720	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	202	Weifang Medical College	MS – 2008		510, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	203	Xi An Jiaotong University	BS – 2009		530, 720	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	204	Siena College	BS – 2010	3.46	500, 710	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	205	Shanghai Institute of Bioproducts	BS – 2007		360, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	206	Jilin University	BS – 2001		440, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	207	Vaagdevi College of Pharmacy	BS – 2009		550, 690	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	208	Shandong University	BS – 2009		500, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	209	China Pharmaceutical University	BS – 2011		530, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	210	Seoul Women's University	BS – 2010		700, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	211	U. of Ibadan	BS – 2007		580, 740	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	212	Sun Yat-Sen University	BS – 2007		320, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	213	Indian Institute of Technology	BS – 1998		340, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	214	U. of Nevada, Reno	BS – 2004	3.59	620, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	215	U. of Pittsburgh	BS – 2011	3.33	590, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	216	U. of Virginia	BS – 2011	3.33	670, 730	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	217	Nanjing Agricultural University	BS – 2011		600, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	218	Anna University	BS – 2010		580, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	219	Bogazic University	BS – 2008		310, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	220	Wuhan University	BS – 2011		580, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	221	McNeese State University	BS – 2009	3.71	510, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	222	Loyola College	BS – 2008		460, 610	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	223	China Agricultural University	BS – 2011	3.66	420, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	224	Zhengzhou University	BS – 2011		580, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	225	Earlham College	BS – 2011	3.30	490, 580	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	226	Erskine College	BS – 2010	3.76	430, 690	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	227	Rhode Island College	BS – 2006	3.00	450, 600	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	228	Universidad De Puerto Rico	BS – 2005	3.36	450, 440	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	229	University of Dhaka	BS – 2004		460, 620	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	230	U. of South Florida	BS – 2011	3.18	370, 470	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	231	National Taiwan University	BS – 2010		420, 680	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	232	Nanjing Agricultural University	BS – 2008		340, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	233	U. of Florida	BS – 2011	3.39	500, 700	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	234	U. of Agriculture	BS – 2006		520, 700	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	235	Jilin University	BS – 2008		530, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	236	West Bengal University of Technology	BS – 2000		590, 690	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	237	New College of the University of South Florida	BS – 2008		610, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	238	Dr. D. Y. Patil Biotech & Bioinformatics	BS – 2010		610, 710	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	239	Florida State University	BS – 2011	2.60	450, 640	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	240	Central China Normal University	BS – 2007		590, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	241	Nagpur University	BS – 2009		490, 590	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	242	China Pharmaceutical University	BS – 2011	3.38		N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	243	Ursinus College	BS	2.90	520, 670	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	244	Soongsil University	BS – 2005		580, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	245	Auburn	BS – 2006		520, 540	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	246	U. of Connecticut	BS – 2010	3.59	560, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	247	Nanjing Medical University	BS – 2011		610, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	248	Agnes Scott College	BS – 2009	3.00	460, 660	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	249	Whitman College	BS – 2011	3.00		N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	250	Liaoning Normal University	BS – 2008		550, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	251	Korea University	BS – 2007		380, 680	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	252	Dixie College	BS – 2010	3.40	400, 530	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	253	Jilin University	BS – 2010		580, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	254	All India Institute of Medical Sciences	BS – 2011		500, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	255	Anna University	BS – 2011		540, 710	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	256	Wuhan University	BS – 2009		560, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	257	Skidmore College	BA – 2011	3.38	420, 680	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	258	U. of Virgin Islands	BS – 2009		480, 500	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	259	Huazhong Agricultural University	BS – 2011		710, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	260	Wenzhou Medical College	BS – 2007		700, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	261	U. of Kentucky	BS – 2011	2.54	590, 480	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	262	Kwame Nkrumah University of Science and Technology	BS – 1997			N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	263	Jaypee Institute of Information Technology University	BS – 2007		390, 710	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	264	Anna University	BS – 2011		490, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	265	U. of Tampa	BS – 2011	3.54	350, 580	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	266	Anna University	BS – 2011		560, 690	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	267	U. of Dhaka	BS – 2004		630, 720	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	268	Huazhong Agricultural University	BS – 2011	3.43	610, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	269	Anna University	BS – 2011		450, 630	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	270	Fu-Jen Catholic University	BS – 2005		510, 790	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	271	University of Science & Technology of China	BS – 2009	3.41		N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	272	Bilkent University	BS – 2009		340, 710	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	273	U. of Florida	BS – 2011	2.60	620, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	274	U. of Delhi	BS – 2008		660, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	275	Uttar Pradesh Tech	BS – 2010		530, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	276	Third Military Medical University	BS – 2008			N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	277	U. of Calcutta	BS – 2008		410, 560	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	278	National Taiwan University	BS – 2005		600, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	279	Sejong University	BS – 2011		630, 790	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	280	Nankai University	BS – 2011		500, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	281	U. of Garyounis	BS – 2001		300, 700	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	282	Nankai University	BS – 2011		410, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	283	Wuhan University	BS – 2006		550, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	284	North Carolina State University	BS – 2008	2.86	610, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	285	Alcorn State University	BS – 2011	3.50	470, 680	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	286	U. of Delhi	BS – 2004		550, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	287	George Mason	BS – 2010	3.00	470, 690	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	288	Capital Medical University	BS – 2009		600, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	289	Anna University	BS – 2010		520, 720	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	290	Northwestern State University of Louisiana	BS – 2010	3.79	390, 510	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	291	Bombay College of Pharmacy	BS – 2010		500, 750	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	292	U. of Alabama, Birmingham	BS – 2010	2.23	550, 650	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	293	U. of Tehran	BS – 2008		270, 740	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	294	Ball State University	BS – 2009	3.70	480, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	295	U. of Florida	BS – 2006	3.35	430, 600	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	296	U. of Puerto Rico	BS – 2010	3.40	480, 610	N	N	N	

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2011	Interdisciplinary Program in Biomedical Sciences	297	U. of Dhaka	BS – 2007		480, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	298	Huazhong University of Science & Technology	BS – 2009		440, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	299	Kasturba Medical College	BS – 2006		570, 710	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	300	Beijing Forestry University	BS – 2011		510, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	301	Nankai University	BS – 2011		660, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	302	Institute Of Pharmacy	BS – 2009		480, 780	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	303	U. of Tehran	BS – 2007		310, 720	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	304	U. of North Florida	BS – 2008	2.31	470, 620	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	305	Randolph-Macon College	BS – 2010	3.10	550, 560	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	306	William and Mary	BS – 2009	3.50	650, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	307	A.C. College of Technology	BS – 2008		630, 760	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	308	Kennesaw State College		3.90	590, 680	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	309	U. of Connecticut	BS – 2011	3.60	590, 770	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	310	Eckerd College	BS – 2007	3.70	480, 670	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	311	National Taiwan Normal University	BS – 2004	3.09	490, 800	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	312	Arizona State University	BS – 2010	3.80	610, 680	N	N	N	
2011	Interdisciplinary Program in Biomedical Sciences	313	College of the Holy Cross	BS – 2011	3.40	540, 660	N	N	N	

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2011	Psychology	1	U. of Tampa	BA - 2011	3.9	490, 600		N	N	N
2011	Psychology	2	Valencia College, California State University, Northridge	AA – 2007 BA – 2011	3.9	590, 650		N	N	N
2011	Psychology	3	Valencia College, U. of Central Florida	AA – 2008 BA – 2011	3.9	480, 710		N	N	N
2011	Psychology	4	City University, University College L	BA – 1999 MS – 2002		330, 700		N	N	N
2011	Psychology	5	CUNY – Hunter College	BA – 2011	3.4	480, 400		N	N	N
2011	Psychology	6	Loyola University, New Orleans	BA – 2010	3.9			N	N	N
2011	Psychology	7	Spelman College, Howard University	BA – 2009 MS – 2011	3.6	320, 280		N	N	N
2011	Psychology	8	Northern Arizona University	BA – 2009	3.8	580, 550		N	N	N
2011	Psychology	9	Northwest Missouri State University, Emporia State University	BA – 2008 MS – 2011	2.6	510, 610		N	N	N
2011	Psychology	10	Yildiz Technical University, Bogazici University	BA – 2006 MS – 2011		390, 790		N	N	N
2011	Psychology	11	U. of Michigan, Ann Arbor, Northeastern University	BA – 2004 MS – 2011	3.4	610, 710		N	N	N
2011	Psychology	12	Stetson University	BA – 2010	3.8	650, 670		?	N	N
2011	Psychology	13	Cosumnes River College, U. of California, Davis, California State University, Los Angeles	AA – 2007 BA – 2009 MS – 2011	3.2	510, 700		N	N	N
2011	Psychology	14	U. of Georgia	BA – 2010	3.9	530, 610		N	N	N
2011	Psychology	15	Santa Fe College, St. Leo University	AA – 1996 BA – 2009	3.9	630, 420		Y	Y	
2011	Psychology	16	National Taiwan Norm, U. of Missouri, Columbia	BA – 2003 MS – 2009 MS – 2009		540, 670		N	N	N
2011	Psychology	17	Waseda University, Boston College	BA – 2009 MS – 2011		430, 760		N	N	N
2011	Psychology	18	U. of Georgia	BA – 2010		590, 610		N	N	N
2011	Psychology	19	New York University	BA – 2011	3.4	460, 590		N	N	N

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2011	Psychology	20	Broward College, Nova Southeastern University, Trinity International University	AA – 1999 BA – 2001 MS – 2008	4.0	580, 630		N	N	N
2011	Psychology	21	Brevard Community College, Florida State University	AA – 2008 BA – 2011	3.7	530, 610		N	N	N
2011	Psychology	22	Maryville University of St. Louis	BA – 2010	3.9	600, 600		Y	Y	
2011	Psychology	23	Vassar College	BA – 2009	3.8	620, 650		N	N	N
2011	Psychology	24	Christopher Newport University	BA – 2011	3.5	550, 530		N	N	N
2011	Psychology	25	California State University, Long Beach	BA – 2010	3.7	600, 650		N	N	N
2011	Psychology	26	Southeastern University	BA – 2011	3.6	500, 680		N	N	N
2011	Psychology	27	College of Charleston, Florida Institute of Technology	BA – 2007 MS – 2010	4.0	410, 690		N	N	N
2011	Psychology	28	Yale University	BA – 2011	3.9	780, 800		N	N	N
2011	Psychology	29	Peking University	BA – 2011		380, 800		N	N	N
2011	Psychology	30	Tulane University	BA – 2011	3.9	640, 590		N	N	N
2011	Psychology	31	Northeast Mississippi Community College, Florida A&M, Alabama State University	AA – 2006 BA – 2008 MS – 2010	3.4	390, 270		N	N	N
2011	Psychology	32	Bloomsburg University of Pennsylvania, Villanova University	BA – 2008 MS – 2010	3.7	620, 680		N	N	N
2011	Psychology	33	U. of Toronto	BA – 2011		530, 670		N	N	N
2011	Psychology	34	U. of Miami	BA – 2010	3.7	570, 610		N	N	N
2011	Psychology	35	Providence College	BA – 2008	3.6	620, 690		N	N	N
2011	Psychology	36	Gainesville State College, U. of Georgia, Georgia State University	AA – 2004 BA – 2006 MS – 2009	3.8	500, 540		N	N	N
2011	Psychology	37	U. of Delaware, Villanova	BA – 2004 MS – 2006	3.6			N	N	N
2011	Psychology	38	U. of Houston, Boston University	BA – 2008 MS – 2010	3.8	530, 740		N	N	N
2011	Psychology	39	Loyola University, Chicago	BA – 2010 MS – 2011	3.9	600, 670		N	N	N

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2011	Psychology	40	CUNY – College of Staten Island	BA – 2008 MS – 2011	3.8	570, 640		N	N	N
2011	Psychology	41	U. of California, Davis	BA – 2010	3.5	460, 680		N	N	N
2011	Psychology	42	San Jose State University	BA – 2010	3.9	490, 560		N	N	N
2011	Psychology	43	Howard Payne University, St. Mary's University	BA – 2009 MS – 2011	3.8	610, 640		N	N	N
2011	Psychology	44	U. of Connecticut, Storrs	BA – 2012	3.7	580, 720		?	N	N
2011	Psychology	45	Coastal Carolina Community College, U. of North Carolina, Wilmington	AA – 2007 BA – 2009	3.8	400, 540		N	N	N
2011	Psychology	46	Wellesley College	BA – 2009	2.6			N	N	N
2011	Psychology	47	North Carolina State University	BA – 2011	3.1	630, 800		Y	Y	
2011	Psychology	48	Ohio Northern University	BA – 2010	3.6	520, 650		N	N	N
2011	Psychology	49	Bethel College	BA – 2009	3.9	580, 710		N	N	Y
2011	Psychology	50	Zinman College of Physical Education, U. of Nevada, Las Vegas	BA – 2008 MS – 2011		400, 660		N	N	N
2011	Psychology	51	Indiana University, Bloomington, U. of Chicago	BA – 2006 MS – 2011	3.9	520, 620		N	N	N
2011	Psychology	52	U. of North Carolina at Chapel Hill	BA – 2011	3.4	620, 750		N	N	N
2011	Psychology	53	Universidade Federal, Northern Virginia Community College, Towson University	BA – 2004 AA – 2007 BA – 2008	3.5	310, 400		N	N	N
2011	Psychology	54	Santa Fe College, St. Leo University	AA – 2008 BA – 2011	3.4	560, 710		N	N	N
2011	Psychology	55	Notre Dame	BA – 2011	3.8	670, 770		N	N	N
2011	Psychology	56	Xavier University	BA – 2011	3.9	490, 630		N	N	N
2011	Psychology	57	West Virginia University	BA – 2010	3.9	600, 750		N	N	N
2011	Psychology	58	U. of Florida	BA – 2011	3.9	620, 690		N	N	N
2011	Psychology	59	Sweet Briar College	BA – 2009	3.7			N	N	N
2011	Psychology	60	Ursinus College	BA – 2011	3.9	620, 760		N	N	N
2011	Psychology	61	U. of Pittsburgh	BA – 2011	3.5	630, 670		N	N	N

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2011	Psychology	62	Florida International University	BA – 2011	3.7	480, 540		N	N	N
2011	Psychology	63	Boise State University	BA – 2011	3.6	490, 500		N	N	N
2011	Psychology	64	U. of Rochester	BA – 2011	3.8	550, 680		N	N	N
2011	Psychology	65	U. of the Cumberlands, U. of North Florida	BA – 2007 MS – 2009	4.0	410, 430		N	N	N
2011	Psychology	66	The Art Institute of Colorado, U. of Colorado, Denver	BA – 2001 BA – 2010	3.3	650, 730		N	N	N
2011	Psychology	67	Marquette, Chicago School of Professional Psychology	BA – 2010 MS – 2011	4.0	580, 580		N	N	N
2011	Psychology	68	National Tsing Hua University, National Chanhua University	BA – 1997 MS – 2005		390, 800		N	N	N
2011	Psychology	69	Austin College	BA – 2009	3.9	640, 640		N	N	N
2011	Psychology	70	Florida State University, La Salle University	BA – 2006 MS – 2009	3.6	540, 610		N	N	N
2011	Psychology	71	Lipscomb University	BA – 2010	3.5	560, 670		N	N	N
2011	Psychology	72	U. of Central Florida	BA – 2011	3.6	520, 780		N	N	N
2011	Psychology	73	Elon University, Towson University	BA – 2009 MS – 2011	3.6	450, 600		N	N	N
2011	Psychology	74	Oral Roberts University	BA – 2011	3.9	660, 770		N	N	N
2011	Psychology	75	Santa Fe Community College, U. of New Mexico	AA – 2008 BA – 2010	3.6	490, 670		N	N	N
2011	Psychology	76	Kent State University	BA – 2011	3.5	400, 650		N	N	N
2011	Psychology	77	Lewis and Clark College	BA – 2010	3.7	600, 590		N	N	N
2011	Psychology	78	Garrett College, Frostburg State University	AA – 2008 BA – 2011	3.6	480, 330		N	N	N
2011	Psychology	79	U. of Florida	BA – 2009	3.4	480, 650		N	N	N
2011	Psychology	80	Hillsborough Community College, U. of South Florida	AA – 2006 BA – 2008	3.6	570, 660		N	N	N
2011	Psychology	81	Lafayette College	BA – 2011		650, 780		N	N	N
2011	Psychology	82	SUNY College at Plattsburgh, SUNY at New Paltz	BA – 2008 MS – 2011	3.8	560, 570		N	N	N
2011	Psychology	83	College of Charleston, U. of North Carolina, Wilmington	BA – 2008 MS – 2011	3.3	670, 780		N	N	N

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2011	Psychology	84	U. of Virginia	BA – 2011	3.5	640, 680		N	N	N
2011	Psychology	85	U. of California, Los Angeles	BA – 2009	3.7	740, 690		N	N	N
2011	Psychology	86	Vassar	BA – 2006	3.7	690, 530		N	N	N
2011	Psychology	87	U. of Georgia	BA – 2010	3.5	500, 730		N	N	N
2011	Psychology	88	U. of the We	BA – 2010		700, 600		N	N	N
2011	Psychology	89	U. of Florida, Montana State University, Bozeman	BA – 2009 MS – 2011	3.5	600, 620		N	N	N
2011	Psychology	90	U. of Florida	BA – 2011	3.2	470, 590		N	N	N
2011	Psychology	91	Sung Kyun Kwan University	BA – 2007 MS – 2009		710, 800		N	N	N
2011	Psychology	92	VIT University, SUNY at Buffalo	BA – 2009 MS – 2011		710, 800		N	N	N
2011	Psychology	93	McNeese State University	BA – 2008 MS – 2010	3.3			N	N	N
2011	Psychology	94	U. of Georgia	BA – 2010	3.2	490, 580		N	N	N
2011	Psychology	95	U. of Florida	BA – 2009	3.4	590, 740		N	N	N
2011	Psychology	96	West Virginia University	BA – 2011	4.0	590, 720		N	N	N
2011	Psychology	97	U. of Missouri, Kansas City	BA – 2011	3.9	570, 550		N	N	N
2011	Psychology	98	Northwest Florida State College, Florida State University	AA – 2009 BA – 2011	4.0	600, 710		N	N	N
2011	Psychology	99	College of Charleston	BA – 2011	3.3	460, 620		N	N	N
2011	Psychology	100	Auburn	BA – 2011	3.5	460, 620		N	N	N
2011	Psychology	101	Florida State University, Florida International University	AA – 2008 BA – 2011	3.6	620, 530		N	N	N
2011	Psychology	102	Georgetown, Catholic University of America	BA – 2007 MS – 2011	3.8	580, 650		N	N	N
2011	Psychology	103	West Virginia University, Frostburg State University	BA – 2007 MS – 2011	3.4			N	N	N
2011	Psychology	104	U. of Toronto, U. of Guelph	BA – 2002 MS – 2009		490, 610		Y	Y	
2011	Psychology	105	Florida Atlantic University	BA – 2009	3.5	520, 570		N	N	N
2011	Psychology	106	Louisiana State University and A&M College	BA – 2010	4.0	560, 740		Y	Y	

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2011	Psychology	107	U. of Natura	BA – 2011		680, 800		N	N	N
2011	Psychology	108	SUNY at Binghamton	BA – 2011	3.5	480, 730		N	N	N
2011	Psychology	109	New York University	BA – 2009	3.6	640, 690		Y	Y	
2011	Psychology	110	U. of North Carolina, Wilmington	BA – 2006 MS – 2009	3.6	600, 670		N	N	N
2011	Psychology	111	Clemson, Pepperdine	BA – 2009 MS – 2011	3.6	530, 630		N	N	N
2011	Psychology	112	Brown, Temple	BA – 2002 MS – 2009	4.0	660, 790		Y	Y	
2011	Psychology	113	Armstrong Atlantic State University, Georgia Southern University	BA – 2009 MS – 2011	3.5	550, 550		N	N	N
2011	Psychology	114	Dartmouth College, Harvard	BA – 2005 MS – 2009		580, 770		Y	Y	Y
2011	Psychology	115	U. of Florida	BA – 2011	3.2			N	N	N
2011	Psychology	116	Henan University, South China Normal University	BA – 2008 MS – 2011		550, 790		N	N	N
2011	Psychology	117	Middle East Technical, Hokkaido University	BA – 2008 MS – 2011		330, 790		N	N	N
2011	Psychology	118	U. of California, Los Angeles, U. of California, Irvine	BA – 2009 MS – 2011	3.8	560, 580		N	N	N
2011	Psychology	119	U. of South Florida	BA – 2011	3.1	540, 460		N	N	N
2011	Psychology	120	Georgia Tech	BA – 2009	3.6	660, 640		N	N	N
2011	Psychology	121	Shahid Behehsti University, Rehabilitation and W, San Francisco State University	BA – 2005 MS – 2007 MS – 2010		310, 650		N	N	N
2011	Psychology	122	Elmira College	BA – 2011	4.0			N	N	N
2011	Psychology	123	Saint Mary's College	BA - 2011	3.8	450, 660		N	N	N
2011	Psychology	124	Rollins College	BA – 2011	3.1	420, 670		N	N	N
2011	Psychology	125	U. of California, Irvine	BA – 2009	3.6	470, 750		N	N	N
2011	Psychology	126	Santa Fe College U. of Florida, Western Michigan University	AA – 2005 BA – 2007 MS – 2011	3.3	500, 550		N	N	N
2011	Psychology	127	U. of Maryland, College Park	BA – 2010	3.7	590, 700		N	N	N

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2011	Psychology	128	U. of California, Irvine California State University, Fullerton	BA – 2007 MS – 2011	3.2	510, 410		N	N	N
2011	Psychology	129	Tennessee Technological University	BA – 2010	3.9	740, 760		N	N	N
2011	Psychology	130	Lamar University	BA – 2008 MS – 2010	4.0	590, 720		N	N	N
2011	Psychology	131	Bradley University	BA – 2011	3.3	580, 640		N	N	N
2011	Psychology	132	Beijing University	BA – 2006		550, 790		N	N	N
2011	Psychology	133	Wuhan University	BA – 2011		610, 800		N	N	N
2011	Psychology	134	Illinois State University, Eastern Illinois University	BA – 2007 MS – 2010	3.6	470, 590		N	N	N
2011	Psychology	135	McNeese State University	BA - 2010	3.6	460, 590		N	N	N
2011	Psychology	136	Furman	BA – 2008	3.3	660, 690		N	N	N
2011	Psychology	137	U. of Houston	BA – 2010	3.7	440, 580		N	N	N
2011	Psychology	138	Georgia College and State University, Western Carolina University	BA – 2009 MS - 2011	3.2	560, 600		N	N	N
2011	Psychology	139	U. of South Florida	BA – 2010		710, 540		N	N	N
2011	Psychology	140	Santa Fe College	AA – 1999 AA – 2002	3.6	550, 660		N	N	N
2011	Psychology	141	U. of Central Florida, Howard	BA – 2006 MS – 2008		570, 560		N	N	N
2011	Psychology	142	Florida State, U. of North Florida	BA – 2002 MS – 2011	3.5	640, 630		N	N	N
2011	Psychology	143	U. of Florida, Florida State	BA – 2008 MS – 2011	3.6	610, 700		N	N	N
2011	Psychology	144	Santa Fe College, U. of Florida, U. of North Texas	AA – 2001 BA – 2004 BA – 2004 MS – 2010	3.5	640, 630		N	N	N
2011	Psychology	145	Santa Fe College, U. of Florida	AA – 2009 AA – 2009 BA – 2011	4.0	620, 790		N	N	N
2011	Psychology	146	Ohio State University	BA - 2009	3.6	680, 700		N	N	N
2011	Psychology	147	Indiana University, Bloomington	BA – 2011	3.8	560, 770		N	N	N

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2011	Psychology	148	San Diego State University, Wesleyan University	BA – 2003 MS – 2005	3.2	490, 430		N	N	N
2011	Psychology	149	Colorado State University	BA – 2009	3.7	440, 650		N	N	N
2011	Psychology	150	McGill University, St. Johns University	BA – 1990 MS – 2001		580, 590		N	N	N
2011	Psychology	151	U. of Missouri, St. Louis	BA – 2009	3.8	500, 800		N	N	N
2011	Psychology	152	Kent State University, Eastern Michigan University	BA – 2008 BA – 2011	3.8	660, 540		N	N	N
2011	Psychology	153	U. of Texas at Austin	BA – 2009	3.3	510, 540		N	N	N
2011	Psychology	154	U. of New Orleans	BA – 2008	3.9	530, 760		N	N	N
2011	Psychology	155	Embry-Riddle Aeronautical University	BA – 2007 MS – 2011		420, 560		N	N	N
2011	Psychology	156	Tulane	BA – 2010	3.7			N	N	N
2011	Psychology	157	College of New Jersey	BA – 2011	3.5	530, 670		N	N	N
2011	Psychology	158	Drake University	BA – 2011	3.6	610, 710		N	N	N
2011	Psychology	159	Grand Valley State University	BA – 2006	3.6	690, 700		N	N	N
2011	Psychology	160	U. of Georgia, Augusta State University	BA – 2008 MS – 2010	4.0	570, 570		N	N	N
2011	Psychology	161	U. of La Verne	BA – 2010	3.8	440, 570		N	N	N
2011	Psychology	162	Sharif University, West Virginia University	BA – 2000 MS – 2003		470, 720		N	N	N
2011	Psychology	163	Georgia College and State University	BA – 2011	3.9	540, 620		N	N	N
2011	Psychology	164	Kenyon College	BA – 2010	3.2	480, 730		N	N	N
2011	Psychology	165	U. of Florida	BA – 2011	3.8	500, 690		Y	Y	
2011	Psychology	166	Florida Gulf Coast University	BA – 2011	3.8	560, 540		N	N	N
2011	Psychology	167	U. of Washington, Seattle	BA – 2005	3.9	650, 770		N	N	N
2011	Psychology	168	San Diego State University	BA – 2011	3.5	480, 530		Y	Y	
2011	Psychology	169	Columbus State Community College, Ohio State University	AA – 2009 BA – 2010	3.8	460,660		N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Psychology	170	U. of Illinois at Urbana-Champaign, Teacher's College, Columbia University	BA – 2008 MS – 2010	3.4	640, 780		N	N	N
2011	Psychology	171	China University	BA – 2011		700, 760		N	N	N
2011	Psychology	172	Colorado State University, Springfield College	BA – 2009 MS – 2011	3.3	460, 630		N	N	Y
2011	Psychology	173	Kennesaw State University	BA – 2009	3.3	640, 620		N	N	N
2011	Psychology	174	Jacksonville State University	BA – 2009 MS – 2011	3.7	430, 570		N	N	N
2011	Psychology	175	Nanjing Normal University	BA – 2011		480, 770		N	N	N
2011	Psychology	176	U. of Central Florida	BA – 2011	3.4	510, 390		N	N	N
2011	Psychology	177	Peking University	BA – 2010		460, 790		N	N	N
2011	Psychology	178	Indian River State College, Florida State	AA – 2008 BA – 2011	3.8	550, 690		N	N	N
2011	Psychology	179	CUNY Queens College	BA – 2011	3.5	370, 530		N	N	N
2011	Psychology	180	U. of North Carolina at Charlotte	BA – 2010	3.8	640, 790		N	N	N
2011	Psychology	181	Tallahassee Community College, U. of Florida	AA – 2009 BA – 2011	3.2	570, 620		N	N	N
2011	Psychology	182	Western Michigan University, Auburn	BA – 2007 MS – 2009	3.6	510, 650		N	N	N
2011	Psychology	183	Wake Forest University, U. of North Florida Auburn	BA – 2006 BA – 2010 MS – 2011	3.4	590, 730		Y	Y	
2011	Psychology	184	Zhejiang University	BA – 2011		550, 800		N	N	N
2011	Psychology	185	College of Charleston	BA – 2011	3.8	500, 620		N	N	N
2011	Psychology	186	U. of California, Santa Barbara	BA – 2011	3.8	640, 660		N	N	N
2011	Psychology	187	McMaster University	BA – 2009		410, 630		N	N	N
2011	Psychology	188	U. of Florida	BA – 2011	3.4	670, 720		Y	Y	
2011	Psychology	189	National Taiwan University	BA – 2010		560, 790		N	N	N
2011	Psychology	190	Mumbai University, Sophia College, U. of Central Florida	BA – 2007 BA – 2007 MS – 2010		440, 650		N	N	N
2011	Psychology	191	Christopher Newport University	BA – 2011	3.6	600, 580		N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Psychology	192	Shahid Behehsti University	MS – 2011				N	N	N
2011	Psychology	193	Michigan State University, 8154981GE University	BA – 2007 MS – 2008		590, 690		N	N	N
2011	Psychology	194	U. of Florida	BA - 2010	3.3	570, 710		N	N	N
2011	Psychology	195	Marquette University	BA – 2007	4.0	610, 630		N	N	N
2011	Psychology	196	U. of Georgia	BA – 2011	3.6	710, 640		N	N	N
2011	Psychology	197	Shanghai Jiaotong University, Beijing Normal University	BA – 2006 MS – 2010		590, 800		N	N	N
2011	Psychology	198	Brigham Young University	BA – 2010	3.9	480, 700		N	N	N
2011	Psychology	199	U. of Florida	BA – 2010	3.9	500, 670		N	N	N
2011	Psychology	200	Miami University (OH)	BA – 2010	3.4	550, 620		N	N	N
2011	Psychology	201	U. of California, Berkeley	BA – 2006	3.3	530, 620		N	N	N
2011	Psychology	202	Beijing Institute of, Beijing Normal University	BA – 2066 MS – 2011		510, 800		N	N	N
2011	Psychology	203	U. of Oregon	BA – 2009	3.8	680,620		N	N	N
2011	Psychology	204	College of the Canyons, Antelope Valley College, U. of California, Davis	AA – 2007 AA – 2008 BA – 2011	3.2	430, 730		N	N	N
2011	Psychology	205	Clemson	BA – 2011	3.6	630, 780		Y	Y	
2011	Psychology	206	Maryville University of St. Louis	BA – 2010	4.0	520, 720		N	N	N
2011	Psychology	207	U. of California, San Diego	BA – 2009	3.2	450, 700		N	N	N
2011	Psychology	208	Sultan Qaboos University, Jordan University	BA – 1998 MS – 2002 MS – 2007				N	N	N
2011	Psychology	209	U. of North Carolina at Chapel Hill	BA – 2009	3.5	510, 660		N	N	N
2011	Psychology	210	Oral Roberts University	BA – 2010	3.8	410, 690		N	N	N
2011	Psychology	211	Lehigh University	BA – 2011	3.7	580, 720		N	N	N
2011	Psychology	212	U. of Maryland, College Park	BA – 2010	3.7	500, 620		N	N	N
2011	Psychology	213	U. of South Carolina, Columbia, U. of Kentucky	BA – 2008 BA – 2011	3.4	530, 690		N	N	N
2011	Psychology	214	Elon University, Villanova	BA – 2008 MS – 2010 MS – 2011	3.9	560, 710		N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Psychology	215	University of Miami	BA – 2011	3.8			N	N	N
2011	Psychology	216	Onondaga Community College, SUNY College at Cortland	BA – 2005 BA – 2008		720, 700		N	N	N
2011	Psychology	217	U. of Southern California	BA – 2009	3.3	720, 770		N	N	N
2011	Psychology	218	U. of Kentucky	BA – 2011	4.0	530, 750		N	N	N
2011	Psychology	219	Virginia Polytechnic Institute and State University	BA – 2011	3.7	480, 530		N	N	N
2011	Psychology	220	Old Dominion University	BA – 2009	3.3	460, 320		N	N	N
2011	Psychology	221	Cornell, Columbia	BA – 2007 MS – 2010	3.0	530, 630		N	N	N
2011	Psychology	222	Rajiv Gandhi University	BA – 2007		410, 730		N	N	N
2011	Psychology	223	Florida State College at Jacksonville, U. of North Florida, Western Kentucky University	AA – 2001 BA – 2003 MS – 2006	3.6	390, 590		N	N	N
2011	Psychology	224	U. of Dayton	BA – 2011	3.6	500, 620		N	N	N
2011	Psychology	225	U. of Nevada, Reno	BA – 2010	3.4	520, 440		N	N	
2011	Psychology	226	Shippensburg University of Pennsylvania, U. of North Florida	BA – 2008 MS – 2010	3.9	450, 700		N	N	N
2011	Psychology	227	Dalton State College, Georgia State University	AA – 2007 BA – 2010	3.7	590, 640		N	N	N
2011	Psychology	228	SUNY at Birmingham	BA – 2010	3.3	600, 660		N	N	N
2011	Psychology	229	U. of Florida	BA – 2011	3.7	490, 500		N	N	N
2011	Psychology	230	Valdosta State University	BA – 2011	3.9	470, 450		N	N	N
2011	Psychology	231	Peking University	BA – 2010		510, 800		Y	Y	
2011	Psychology	232	U. of Minnesota, Twin Cities	BA – 2011	2.9	480, 470		N	N	N
2011	Psychology	233	U. of Florida	BA – 2011	3.8	560, 510		N	N	N
2011	Psychology	234	Urban College of Boston, Emerson College, Boston College	BA – 1993 MS – 2003 MS – 2011	4.0			N	N	N
2011	Psychology	235	National Taipei University, U. of Tennessee, Knoxville, U. of Rochester	BA – 2003 MS – 2010 PhD – 2011		410, 670		N	N	N
2011	Psychology	236	U. of North Carolina, Chapel Hill	BA – 2010	3.1	530, 720		N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Psychology	237	U. of British	BA – 2009		570, 700		N	N	N
2011	Psychology	238	Peking University	PhD – 2011		510, 790		N	N	N
2011	Psychology	239	Wright State University	BA – 2011	3.8	510, 550		N	N	N
2011	Psychology	240	Wesley College, U. of Maryland, Baltimore County	BA – 2006 MS – 2010	3.7	430, 410		N	N	N
2011	Psychology	241	Cuyahoga Community College, Kent State University	AA – 2009 BA – 2011	3.7	560, 690		N	N	N
2011	Psychology	242	Middle Tennessee State University	BA – 2005 BA – 2007	3.4	380, 510		N	N	N
2011	Psychology	243	Appalachian State University	BA -2011	3.5	510, 570		N	N	N
2011	Psychology	244	U. of Georgia, U. of North Carolina, Wilmington	BA – 2007 MS – 2011	3.4	650, 700		N	N	N
2011	Psychology	245	Yonsei University	BA – 2009 MS – 2011		710, 800		Y	Y	
2011	Psychology	246	U. of North Carolina, Wilmington	BA – 2007 MS – 2010	3.6	490, 640		N	N	N
2011	Sociology	1	East Carolina University	BA – 2009 MS – 2011		450, 550		N	N	N
2011	Sociology	2	Purdue	BA – 2008	3.3	720, 530		Y	Y	
2011	Sociology	3	Vietnam National University, California State University, Fullerton	BA – 2005 MS – 2008		280, 650		N	N	N
2011	Sociology	4	Loyola University, Chicago, DePaul University	BA – 2003 MS - 2008	2.8	440, 600		Y	Y	
2011	Sociology	5	Bowling Green	BA – 2004 MS – 2005 MS – 2006	3.5	360, 480		N	N	N
2011	Sociology	6	St. Charles Community College, Brigham Young University	AA – 2007 BA – 2011	3.5	630, 620		Y	Y	
2011	Sociology	7	U. of California, Berkeley	BA - 2010	3.5	630, 610		N	N	N
2011	Sociology	8	National Chengchi University	BA – 2006 MS – 2010		690, 800		N	N	N
2011	Sociology	9	Tel Aviv University, Columbia	BA – 2007 MS – 2010		420, 760		Y	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Sociology	10	U. of Northern Colorado	BA – 2009 MS – 2011	3.5	440, 520		N	N	N
2011	Sociology	11	U. of Montevallo	BA – 2009	3.5			?	N	N
2011	Sociology	12	George Mason University	BA – 2006 MS – 2008	3.5	530, 630		N	N	N
2011	Sociology	13	Valdosta State University	BA – 2008 MS – 2009	3.3	390, 640		N	N	N
2011	Sociology	14	U. of Florida, American University	BA – 1999 MS – 2011	2.8	600, 730		N	N	N
2011	Sociology	15	Rollins College	BA – 2010	3.3	540, 450		N	N	N
2011	Sociology	16	U. of Medellin, U. de Costa Rica	BA – 1998 MS – 2004		430, 570		N	N	N
2011	Sociology	17	Huntington College, Asbury Theological Seminary, U. of Central Florida	BA – 2001 MS – 2007 MS – 2011	4.0	690, 750		N	N	N
2011	Sociology	18	Latvijas Kulturas, Albert Ludwigs University	BA – 2005 MS – 2008		310, 630		N	N	N
2011	Sociology	19	William Paterson University, Morgan State University	BA – 2003 MS – 2009	2.8	420, 380		N	N	N
2011	Sociology	20	Saint John's University, Minnesota State University, Metropolitan State University	BA – 1993 MS – 1996 BA – 2004	2.8	360, 630		N	N	N
2011	Sociology	21	Wright State University	BA – 2009 MS – 2012	2.9	400, 540		N	N	N
2011	Sociology	22	Ventura College, California State University, Northridge	AA – 2008 BA – 2010	3.8	510, 580		Y	Y	
2011	Sociology	23	New College of Florida, U. of Florida, U. of Cape Town, U. of London	BA – 2001 P – 2004 MS – 2005 PhD – 2007		700, 700		Y	Y	
2011	Sociology	24	Howard Community College, Drexel University	AA – 2005 BA – 2009	3.4	580, 430		N	N	N
2011	Sociology	25	U. of Toledo	BA – 2006 MS – 2010	3.7	610, 650		N	N	N
2011	Sociology	26	Georgia Southwestern State University	BA – 2010	3.3	470, 420		N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Sociology	27	Lander University	BA – 2010	3.6	520, 520		N	N	N
2011	Sociology	28	San Jose State University	BA – 2011	3.4	370, 550		N	N	N
2011	Sociology	29	Zhejiang University, Tilburg University, U. of Central Florida	BA – 2008 MS – 2009 MS – 2011		610, 800		N	N	N
2011	Sociology	30	Ball State University	BA – 2008 MS – 2011	3.9	480, 570		Y	Y	
2011	Sociology	31	Tallahassee Community College, Seattle University	AA – 2008 BA – 2010	3.5	570, 670		N	N	N
2011	Sociology	32	Southern Oregon University, U. of San Diego	BA – 2006 MS – 2010	3.3	360, 340		N	N	N
2011	Sociology	33	Peking University	BA – 2011		660, 800		N	N	N
2011	Sociology	34	Lanzhou University, Peking University	BA – 2008 MS – 2011		500, 780		N	N	N
2011	Sociology	35	Eastern Michigan University	BA – 2009	3.8	410, 660		N	N	N
2011	Sociology	36	U. of North Florida	BA – 2010	3.7	480, 480		N	N	N
2011	Sociology	37	Jiangsu University, City University of Hong Kong	BA – 2008 MS – 2011		510, 740		N	N	N
2011	Sociology	38	Beijing Language and Culture University	BA – 2011		580, 800		N	N	N
2011	Sociology	39	Western Dakota Technical Institute, Black Hills State University, U. of South Florida	O – 2004 BA – 2008 MS – 2010	3.4	470, 370		N	N	N
2011	Sociology	40	Turkish Military Academy	BA – 2007		390, 780		N	N	N
2011	Speech Language Hearing	1*	Florida State, San Diego State University	BA – 2005 MS – 2009	3.59		Y	Y	Y	
2011	Speech Language Hearing	2	Northwestern	BA – 2002	3.52	740, 670, 5.0	Y	Y	Y	
2011	Speech Language Hearing	3	U. of Florida	BA – 2002 MA – 2005	3.75		Y	Y	Y	
2011	Speech Language Hearing	4	U. of Florida, Appalachian State	BA – 2009 MA – 2011	3.62	530, 630, 5.0	Y	Y	Y	
2011	Speech Language Hearing	5	U. of Florida	BA – 2009 MA – 2012	3.95	550, 640, 3.5	Y	Y	Y	
2011	Speech Language Hearing	6			3.40		N	N	N	N

Year	Department / Program	Applicant (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergrad GPA	GRE Scores V, Q, A, S (Percentiles) and/or MCAT Scores	Interviewed (Y/N)	Accepted (Y/N)	Enrolled (Y/N)	Support from this Grant (Y/N)
2011	Speech Language Hearing	7	College of Saint Rose	BA – 2009 MA – 2011	3.96	520, 710, 4.5	Y	Y	N	
2011	Speech Language Hearing	8	Manipal University, Case Western Reserve University	BA – 2005 MA – 2008	3.76	610, 690, 4.5	Y	Y	Y	
2011	Speech Language Hearing	9	U. of Georgia	BA – 2009	3.75	490, 670, 4.0	Y	Y	Y	

Program Statistics

Total Number of Applicants	Number of TGE Applicants	Applicants Interviewed	Applicants Accepted	Applicants Enrolled	Applicants Supported By This Grant	Average GRE and/or MCAT Scores	Average GPA
961			128	88		530, 670, 4.5	3.51

Table 9A. Qualifications of the Current Predoctoral Trainees Clearly Associated with the Training Program**(Renewals/Revisions Applications)**

Department / Program	Trainee (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergraduate GPA	GRE Scores / (Percentiles) V, Q, Adv and/or MCAT Scores	Current Research Mentor	Years in Program	Calendar Years Appointed to This Grant
Adult and Elderly Nursing								
Aging and Geriatric Research								
Applied Physiology and Kinesiology								
Clinical and Health Psychology	*	Brigham Young University	BS – 2009	3.99	690, 760, 5	Bauer	2009- Present	
Clinical and Health Psychology	*	U. of Florida	BS – 2008	3.75	600, 720, 5.5	Bauer	2009- Present	
Clinical and Health Psychology	*	U. of Connecticut	BS – 2007	3.85	650, 770, 4.5	Bauer	2009- Present	
Clinical and Health Psychology	*	Florida Institute of Technology	BS – 2007	3.96	700, 610, 4.5	Bauer	2011- Present	
Clinical and Health Psychology	*	U. of Michigan	BS – 2004	3.90	620, 740, 5.5	Bowers	2006- Present	09-10
Clinical and Health Psychology	*	Washington State University	BS – 2006	3.86	670, 660	Bowers	2007- Present	
Clinical and Health Psychology	*	U. of Delaware	BS – 2008	3.93	710, 740, 5.0	Bowers	2008- Present	
Clinical and Health Psychology	*	U. of California	BS – 2010		530, 770, 5.0	Bowers	2010- Present	
Clinical and Health Psychology	*	Stanford University	BS – 2010	3.81	550, 710, 5.0	Dotson	2010- Present	
Clinical and Health Psychology	*	Calvin College	BA – 2004	3.81		Marsiske	2006- Present	05-08
Clinical and Health Psychology	*	U. of California	BA – 2003	3.75	640, 680, 5.5	Marsiske	2008- Present	09-11
Clinical and Health Psychology	*	Syracuse	BS – 2009	3.80	590, 730, 5.5	Marsiske	2009- Present	
Clinical and Health Psychology	*	U. of California, San Diego	BS – 2008	3.01	590, 710, 5.0	Marsiske	2010- Present	10-11
Clinical and Health Psychology	*	U. of Nevada	BA – 2005	3.90	530, 710, 4.5	McCrae	2006- Present	06-09
Clinical and Health Psychology	*	U. of North Texas	BS – 2008	3.80	580, 730, 4.5	McCrae	2008- Present	
Clinical and Health Psychology	*	U. of Central Florida, Wake Forest	BS – 2006 MA – 2008	3.78	580, 650, 4	McCrae	2011- Present	

Department / Program	Trainee (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergraduate GPA	GRE Scores / (Percentiles) V, Q, Adv and/or MCAT Scores	Current Research Mentor	Years in Program	Calendar Years Appointed to This Grant
Clinical and Health Psychology	*	U. of North Texas	BS – 2010	4.00	600, 690, 4.5	McCrae	2011- Present	
Clinical and Health Psychology	*	U. of Pittsburgh	BS – 2010	3.82	520, 690, 4.5	Perlstein	2011- Present	
Clinical and Health Psychology	*	U. of Pittsburgh	BA – 2006	3.81	710, 740	Perlstein	2007- Present	
Clinical and Health Psychology	*	Brown University	BA – 2004	3.80	650, 740, 5.0	Perri	2006- Present	
Clinical and Health Psychology	*	U. of Wisconsin	BA – 2004	3.97	520, 700, 5.0	Perri	2006- Present	
Clinical and Health Psychology	*	Virginia Commonwealth University	BA – 2006	3.78	630, 650	Perri	2007- Present	
Clinical and Health Psychology	*	Temple University	BA – 2005	3.58	580, 650, 4.5	Perri	2008- Present	
Clinical and Health Psychology	*	Southern Methodist University, Stephen F. Austin University	BA – 2006 MA – 2009	3.59	500, 700, 4.5	Perri	2009- Present	
Clinical and Health Psychology	*	Yale University	BA – 2007	3.54	640, 730, 6.0	Perri	2010- Present	
Clinical and Health Psychology	*	U. of Florida	BS – 2009	3.70	560, 760, 4.0	Perri	2010- Present	
Clinical and Health Psychology	*	U. of Florida	BS – 2010	3.93	610, 680, 4.0	Perri	2010- Present	
Clinical and Health Psychology		U. of Jordan, Boston University	BA – 2003 MA – 2009	2.97	450, 660, 4.0	Perri	2011- Present	
Clinical and Health Psychology		Concordia University, Boston University	BA – 2006 MA – 2008	3.38	560, 660, 4.5	Perri	2011- Present	
Clinical and Health Psychology	*	Brigham Young University	BA – 2004 MS – 2006	3.48	720, 710, 5.0	Price	2007- Present	
Clinical and Health Psychology	*	De Anza College, U. of California	AA – 2005 BA – 2007	3.50	650, 650, 5.0	Price	2009- Present	
Clinical and Health Psychology	*	Providence College	BA, BS – 2008	3.50	570, 690, 5.0	Price	2011- Present	
Clinical and Health Psychology	*	Stetson University, U. of Florida	BA – 2008 MA – 2010	3.95	610, 680, 5.0	Robinson	2008- Present	
Clinical and Health Psychology	*	Washington University, U. of Florida	BS – 2008 MS – 2011	3.97	710, 680, 5.0	Robinson	2009- Present	
Clinical and Health Psychology	*	U. of North Carolina	BS – 2007 MS – 2010	3.40	620, 720, 4.5	Robinson	2009- Present	
Clinical and Health Psychology	*	Connecticut College, U. of Florida	BA – 2007 MS – 2008	3.79	500, 640, 5	Robinson	2009- Present	

Department / Program	Trainee (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergraduate GPA	GRE Scores / (Percentiles) V, Q, Adv and/or MCAT Scores	Current Research Mentor	Years in Program	Calendar Years Appointed to This Grant
Clinical and Health Psychology	*	Assumption College, U. of Florida	BA – 2006 MA – 2009	3.57	530, 660, 6.0	Robinson	2010- Present	
Clinical and Health Psychology	*	U. of Florida	BA – 2009	3.66	600, 650, 4.5	Robinson	2011- Present	
Health Care Environments and Systems								
Health Services Research Management and Policy	*	U. of Florida	MBA/MHS – 1987			Duncan	2008- Present	
Health Services Research Management and Policy	*	SUNY College	BS – 1998 MBA/MHS – 2005	3.70	500, 530	Duncan	2009- Present	
Health Services Research Management and Policy	*	U. of South Florida, U. of Florida	BSN – 2005 MS – 2007	3.10	450, 680	Duncan	2009- Present	
Health Services Research Management and Policy	*	U. of Florida	BS – 1992 MBA/MHS – 1997	3.35		Duncan	2010- Present	
Health Services Research Management and Policy	*	Wesleyan College	BA – 2006	3.10	500, 680	Hall	2006- Present	
Health Services Research Management and Policy	*	North Carolina Central University, Florida A&M	BA – 2004 MA – 2009	2.50	390, 440	Hall	2009- Present	
Health Services Research Management and Policy	*	U. of Pittsburgh, U. of Florida	BA – 2005 MPH – 2007	3.40	540, 710	Hall	2011- Present	
Health Services Research Management and Policy	*	Georgia State University	MPA – 2007	3.00		Harman	2007- Present	
Health Services Research Management and Policy		Depauw University	BA – 2006	3.40	550, 680	Harman	2008- Present	
Health Services Research Management and Policy		Peking University	BMS – 2000			Harman	2008- Present	
Health Services Research Management and Policy	*	Wheaton College, Chapman University	BA – 1994 MHA – 1998	3.50	540, 630	Harman	2009- Present	
Health Services Research Management and Policy		Sunshin college, Seoul National, U. of Colorado, Denver	BA – 2005 MPH – 2007 MS/MHA – 2009		670, 790	Harman	2010- Present	
Health Services Research Management and Policy		U. of Missouri, U. of South Florida	MA – 2001 MPH – 2004	2.70	530, 590	Harman	2010- Present	
Health Services Research Management and Policy	*	U. of Florida	BS – 2000 MHA – 2004	3.70	410, 60	Harman	2010- Present	
Health Services Research Management and Policy	*	U. of Alaska, Baylor University	BA – 2000 MHA/MBA - 2008	3.60	450, 600	Harman	2011- Present	
Health Services Research Management and Policy		U. Nacional de Asuncion'	BA		390, 500	Harman	2011- Present	
Interdisciplinary Program in Medical Sciences								
Neurology								

Department / Program	Trainee (List by Number)	Previous Institution(s)	Degree(s) & Year(s)	Undergraduate GPA	GRE Scores / (Percentiles) V, Q, Adv and/or MCAT Scores	Current Research Mentor	Years in Program	Calendar Years Appointed to This Grant
Neuroscience								
Occupational Therapy								
Psychology								
Sociology								
Speech Language Hearing	*	Palm Beach Community College, Florida Atlantic University, Georgia Southern University	AA – 2005 BA – 2007 MA – 2009	3.38	560, 640	Altmann	2010- Present	
Speech Language Hearing	*	Queens University Belfast, U. of Ulster, U. of Florida	BA – 1992 BA – 1998 MA – 2008	4.00	550, 560	Altmann	2008- Present	
Speech Language Hearing		Yonsei University, Seoul Women's University	BA – 2003 MS – 2007	3.91	370, 690	Reilly	2009- Present	
Speech Language Hearing		National Cheng Kung University, U. of Tennessee	BA – 2006 MA – 2010	3.95	400, 730	Reilly	2010- Present	
Speech Language Hearing	*	U. of Florida	BA – 2009	3.60	580, 700	Reilly	2009- Present	

Program Statistics

Total Number of Trainees	Number of TGE Trainees	Average GPA	Average GRE / MCAT Scores
26	50	3.62*	570, 670, 5.0*

*** Please see Progress Report for specific average GRE and GPA of all 26 students admitted to the T32 program**

Table 10: Admissions and Completion Records for Underrepresented Minority (URM) Trainees, Trainees with Disabilities, and Trainees from Disadvantaged Backgrounds Clearly Associated With the Training Program

Diversity Recruitment Group	Trainee (List by Number)	Entering Year (Pre/Post)	Department / Program	Source of Support and if Support by NRSA Grant	In Training	Completed Training	Left Without Completing Training	Current Status Career or Employment
			Adult and Elderly Nursing					
			Aging and Geriatric Research					
			Applied Physiology and Kinesiology					
URM Trainees	*	2008 (Pre)	Clinical and Health Psychology		Y			Graduate Student Fellow, University of Florida
URM Trainees	*	2009 (Pre)	Clinical and Health Psychology		Y			Graduate Student Fellow, University of Florida
URM Trainees	*	2010 (Pre)	Clinical and Health Psychology	McKnight	Y			McKnight Fellow, University of Florida
URM Trainees	*	2010 (Pre)	Clinical and Health Psychology		Y			Research Assistant, University of Florida
URM Trainees	*	2011 (Pre)	Clinical and Health Psychology	McKnight	Y			McKnight Fellow, University of Florida
URM Trainees	*	2011 (Pre)	Clinical and Health Psychology	McKnight	Y			McKnight Fellow, University of Florida
			Health Care Environments and Systems					
URM Trainees	*	2008 (Pre)	Health Services Research Management and Policy		Y			Predoctoral Fellow, University of Florida
URM Trainees	*	2009 (Pre)	Health Services Research Management and Policy		Y			Predoctoral Fellow, University of Florida
URM Trainees	*	2010 (Pre)	Health Services Research Management and Policy		Y			Predoctoral Fellow, University of Florida
URM Trainees	*	2010 (Pre)	Health Services Research Management and Policy		Y			Predoctoral Fellow, University of Florida

Diversity Recruitment Group	Trainee (List by Number)	Entering Year (Pre/Post)	Department / Program	Source of Support and if Support by NRSA Grant	In Training	Completed Training	Left Without Completing Training	Current Status Career or Employment
URM Trainees		2011 (Pre)	Health Services Research Management and Policy		Y			Predoctoral Fellow, University of Florida
URM Trainees	*	2011 (Pre)	Health Services Research Management and Policy		Y			Predoctoral Fellow, University of Florida
			Interdisciplinary Program in Biomedical Sciences (Neuroscience)					
			Neurology					
			Occupational Therapy					
			Psychology					
			Sociology					
URM Trainees		2009 (Pre)	Speech Language Hearing		Y			Predoctoral Fellow, University of Florida

Table 11. Appointments to the Training Grant For Each Year of the Past Award (Renewal Applications Only)

Grant Year	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013
Predoctoral Positions Awarded (Months of Support)	6 (72)	6 (72)	6 (72)	6 (72)	6 (72)
Predoctoral Trainees Appointed (Months of Support Used)	6 (72)	6 (72)	6 (72)	6 (72)	6 (72)
Predoctoral URM Trainees Appointed (Months of Support)	1 (12)	0 (0)	1 (12)	1 (12)	1 (12)
Predoctoral Trainees with Disabilities Appointed (Months of Support)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Predoctoral Trainees from Disadvantaged Background Appointed (Months of Support)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)

Table 12A. Predoctoral Trainees Supported by this Training Grant (Renewal Applications and Non-Competing Continuation Progress Reports Only)

Predoctoral (and MSTP) Trainees (Listed sequentially by Entering Class):

Enter Source(s) of Support and Academic Year for Each Grant Year

Trainee, Year of Entry Prior Degree & Institution (Mentor - Department/program)	Grant Year -01	Grant Year -02	Grant Year -03	Grant Year -04	Grant Year -05	Grant Year -06	Grant Year -07	Grant Year -08	Grant Year -09	Grant Year -10	Title of Research Project or Research Topic	Degree(s) Received (Year)	Current Position and Institution (<i>grant support obtained in italics</i>)
Cook, Sarah; 2003, University of Pittsburgh/BS Psychology (Marsiske - Clinical and Health Psychology)	T32	T32	T32	Note 1							The diagnostic utility of subjective memory questionnaires in normal and pathological aging	2008	Assistant Professor, Duke University
Semegon, Angi; 2003, University of Florida/MS Psychology (Diehl - Psychology)	T32	NRSA	NRSA								Autobiographical memory, self- concept, older adults, self-defining memory	2006	Instructor, Santa Fe College; F31 AG 021877-02
Jones Dotson, Vonetta; 2004, St. Mary's University/BS Psychology (Perlstein - Clinical and Health Psychology)		T32									Cumulative disadvantage in cognitive control due to depression and aging: a double jeopardy hypothesis	2006	Assistant Professor, Dept. Clinical and Health Psychology, University of Florida; R03 AG024539-01; McKnight Brain Research Foundation (no #); U01 AG022376-Supp

Trainee, Year of Entry Prior Degree & Institution (Mentor - Department/program)	Grant Year -01	Grant Year -02	Grant Year -03	Grant Year -04	Grant Year -05	Grant Year -06	Grant Year -07	Grant Year -08	Grant Year -09	Grant Year -10	Title of Research Project or Research Topic	Degree(s) Received (Year)	Current Position and Institution (<i>grant support obtained in italics</i>)
Baron, Jacqueline; 2004, University of Florida/BS Psychology (Bluck – Psychology)		T32	T32	LOA	T32	Note 2	Note 2	Note 2			Functions of autobiographical memory across the lifespan	2010	Research Scientist, Institute for Child Health Policy, University of Florida
Dark-Freudeman, Alissa; 2004, University of Florida/BS Psychology (West – Psychology)			T32	T32	T32	NRSA	NRSA				Memory-related possible selves: exploring age- related differences	2010	Assistant Professor, Psychology, UNC Wilmington; F31 AG 031832
Floetke Elliot, Amanda; 2005, University of Florida/BSN Nursing (Horgas – Nursing)			T32								Assessing and treating chronic pain in community- dwelling older adults with dementia: a single- subject approach	2006	Assistant Professor, Nursing, University of South Florida; Lucille Beeson Trust; Prevent Blindness America
Dzierzewski, Joseph; 2006, University of Nevada Las Vegas/BS Psychology (McCrae – Clinical and Health Psychology)				T32	T32	T32	NRSA	NRSA			Cognitive Aging, Sleep and Cognition in Older Adults, Short-term Variability in Cognitive Performance of Older Adults	2011	Advanced postdoctoral fellowship, Greater Los Angeles VA System GRECC; F31AG032802- 02

Trainee, Year of Entry Prior Degree & Institution (Mentor - Department/program)	Grant Year -01	Grant Year -02	Grant Year -03	Grant Year -04	Grant Year -05	Grant Year -06	Grant Year -07	Grant Year -08	Grant Year -09	Grant Year -10	Title of Research Project or Research Topic	Degree(s) Received (Year)	Current Position and Institution (<i>grant support obtained in italics</i>)
Aennle, Kristina; 2006, Michigan State University/MS Psychology&Neuroscience (Foster – Neuroscience)				T32	T32	Note 3	Note 2	Note 2			Molecular changes in the aging hippocampus	2009	Research Chemist, Department of Veterans Affairs Medical Center Geriatric Research, Education and Clinical Center
Stigge-Kaufman, David; 2007, Bethel College/BS Psychology (Perlstein – Clinical and Health Psychology)					T32						Interference effects of anxiety and affective processing on working memory: behavioral and electrophysiological accounts	2009	Assistant Professor, St. Louis University National Academy of Neuropsychology; UCLA
Witte, Megan; 2007, College of St. Mary/MOT Occupational Therapy (Mann – Rehabilitation Sciences)					T32						External prompting devices for people with dementia	2008	Private practice
Sisco, Shannon; 2008; Calivin College/BA Psychology (Marsiske – Clinical and Health Psychology)						T32	T32	NRSA	NRSA		Neighborhood influences on cognitive level and training gains in the ACTIVE study	2011	Clinical intern, Malcom Randall VA, Gainesville, FL; F31 AG 034002

Trainee, Year of Entry Prior Degree & Institution (Mentor - Department/program)	Grant Year -01	Grant Year -02	Grant Year -03	Grant Year -04	Grant Year -05	Grant Year -06	Grant Year -07	Grant Year -08	Grant Year -09	Grant Year -10	Title of Research Project or Research Topic	Degree(s) Received (Year)	Current Position and Institution (<i>grant support obtained in italics</i>)
Springer, Utaka; 2008; Harvard University/Computer Science (Bowers – Clinical and Health Psychology)						T32					Essential Tremor: Paradoxical Visuospatial Cognition	2009	Post-doctoral fellow, VA Northern California Health Care System (Martinez, CA
Hastings, Erin; 2009; University of Virginia/BA Psychology; Marymount University/MS Education (West – Psychology)							T32	T32			Beliefs and Learning in adulthood	2011	Research Study Coordinator, Movement Disorders, University of Florida
Marcinkiewicz, Catherine; 2009; Johns Hopkins University/BS Biomedical Engineering (Foster/Devine – Psychology/Neuroscience)							T32	Note 3			The role of the organic cation transporter 3 (OCT3) in stress- related psychopathology	2010	Postdoctoral fellow, University of North Carolina at Chapel Hill
Mitchell, Sandra; 2009; California State @ Fresno/BA Psychology (Price – Clinical and Health Psychology)							T32				White Matter and Cognition in Parkinson's Disease	2011	Postdoctoral fellow, University of New Mexico / Albuquerque VAMC
Zahodne, Laura; 2009; University of Michigan, Ann Arbor/BA Biopsychology & Cognitive Science (Bowers – Clinical and Health Psychology)							T32	T32			Components of Depression in Parkinson Disease: Relation to Psychophysiology and Affective Chronometry	2011	Clinical intern, Brown University' F32 NR 013817 (resubmitted)

Trainee, Year of Entry Prior Degree & Institution (Mentor - Department/program)	Grant Year -01	Grant Year -02	Grant Year -03	Grant Year -04	Grant Year -05	Grant Year -06	Grant Year -07	Grant Year -08	Grant Year -09	Grant Year -10	Title of Research Project or Research Topic	Degree(s) Received (Year)	Current Position and Institution (<i>grant support obtained in italics</i>)
Yam, Anna; 2009; University of California @ San Diego/BA, Human Development & Linguistics (Marsiske – Clinical and Health Psychology)								T32	T32	T32	The Effects of Spatially- Demanding Videogame training on Mental Rotation Performance and Confidence in Older Adults	pending	Currently enrolled
Higgins, Torrance; 2007; Randolph-Macon College/BA, Psychology (Manini – Applied Physiology and Kinesiology)								T32	T32	T32	Task Specific Exercise For the Pre-Clinically Disabled	Pending	Currently enrolled
Zlatar, Zvinka; 2005; University of Nevada Las Vegas/BA, Psychology (Crosson – Clinical and Health Psychology)						OAIC Supp.	OAIC Supp.	T32			Exercise, Cognition, and Brain Functions in Older Persons	2011	Postdoctoral fellow, University of California San Diego; <i>U01 AG022376-Supp</i>
Akhtar, Wajiha; 2010, University of Florida/MPH Epidemiology 2008, University of Miami/BS Biomedical Engineering (Cook/Manini – Epidemiology)									T32		Age-related Cognitive Effects on HIV-positive Older Adults	Pending	Currently enrolled
Cohen, Matthew; 2007; University of Delaware/BA; Psychology (Price – Clinical and Health Psychology)									T32		Exo- and Endo- Evoked Movement in Advanced Age and Parkinson's Disease	Pending	Currently enrolled

Trainee, Year of Entry Prior Degree & Institution (Mentor - Department/program)	Grant Year -01	Grant Year -02	Grant Year -03	Grant Year -04	Grant Year -05	Grant Year -06	Grant Year -07	Grant Year -08	Grant Year -09	Grant Year -10	Title of Research Project or Research Topic	Degree(s) Received (Year)	Current Position and Institution (<i>grant support obtained in italics</i>)
Kay, Daniel; 2009; University of Florida/MS; Psychology (Bowers – Clinical and Health Psychology)									T32		Sleep, Aging, and Parkinson's Disease: Impact on Cognition and Mood	Pending	Currently enrolled
Thomas, Kelsey; 2008; University of California, San Diego/BS, Biochemistry; BA, Psychology (Marsiske – Clinical and Health Psychology)									T32	T32	Prompting as a Method for Improving Everyday Cognition in MCI and Unimpaired Older Adults	Pending	Currently enrolled
Arthur, Paul; 2007; Indiana University-Purdue University/ BS, Psychology; 2011; University of Indianapolis, MOT; MS, Gerontology (Mann – Rehabilitation Sciences)										T32	Burden in caregivers of veterans	Pending	Currently enrolled
Mangal, Paul; 2009; New York University / BS, Neural Science (Bowers – Clinical and Health Psychology)										T32	Arousal and induced memory enhancement in aging and Parkinsons disease	Pending	Currently enrolled
Vatthauer, Karlyn; 2009; University of North Texas / BS, Psychology (McCrae – Clinical and Health Psychology)										T32	Relationship of sleep and pain variability with cognition in older adults with and without insomnia	Pending	Currently enrolled

Table Notes: T32: Funded by the T32; NRSA: Funded by an NRSA award; OAIC Supp: Funded by Pepper OAIC Diversity Supplement; Note 1: Funded by an AARP Fellowship; Note 2: Funded by a teaching assistantship; Note 3: Funded by a graduate research assistantship; LOA: Leave of absence

Program Statistics

Percentage of Trainees Entering 10 Years Ago That Completed Ph.D.s	100%
Average Time to Ph.D. for Students in the Last 10 Years (not including leaves of absence)	(note, for students in Clinical and Health Psychology, this average includes an additional year of pre-PhD clinical internship; thus the average time to degree for clinical psychologists is 6 years) 5.6 years

Leadership Team Letters



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Institute on Aging
Division of Biology of Aging

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Dr. Michael Marsiske
Department of Clinical and Health Psychology
University of Florida
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Gainesville, FL 32610-0165

May 22, 2012

Dear Michael:

Thank you for inviting me to participate as a mentor and member of your administrative team on the NIA-funded T32 competing continuation application. The grant, "Physical, Cognitive, and Mental Health in Social Context" aligns well with our Pepper Center (about which much has been written in this proposal).

One of the hats I wear on our Pepper Center is as Core Leader for our Research Career and Development Core (RCDC). The RCDC promotes the development of independent investigators in interdisciplinary research on aging relevant to the independence of older Americans. This core emphasizes the competency-based development of research and leadership skills for translating basic findings into clinical research and clinical findings into basic research. Key to this approach is our partnership with our university's NIH Clinical and Translational Science Institute (CTSI). Resources of this core are integrated with other internal and external sources for career support, such as NIH career development, Minority Supplement, and research awards, fellowships, non-NIH career and research awards, VA, and CTSI support. The RCDC supports the research training of Junior Scholars who span the spectrum from beginning trainees not yet funded, to advanced trainees who already have competed successfully for career development or grants that provide substantial salary support. The overarching goal of the RCDC is to meet the objective of all OAICs to recruit, select, and train talented Junior Scholars who are committed to translational science and to integrating clinical insights of health/disease and independence/disability in older adults with knowledge of the advances in the basic sciences to improve clinical interventions for maintaining health and independence. To achieve this goal, emphasis is placed on an interdisciplinary career development plan that generates knowledge from a diverse cadre of scientists (basic, translational, social, behavioral, epidemiological, and clinical). This entails utilization of the full scope of Pepper Center facilities, which includes Recruiting, Clinical, Biostatistics and Metabolism and Translation Science Cores. Detailed career development plans are tailored for each proposed Junior Scholar supported by this core. Such plans include, but are not limited to, (a) a research project integrated with the theme of our Pepper Center, (b) a formal training strategy that stresses integration of basic and clinical research; (c) a formal mentorship program that uses a team approach to foster basic and clinical science approaches, and (d) a monitoring process to formally evaluate the progress of trainees using specific milestones of achievement.

We connect with the T32 program in several ways. First, there is an allied focus on the maintenance of independence and prevention of disability. Second, we use very similar mentoring processes and productivity monitoring. Third – and perhaps of greatest relevance to this T32 – we offer a weekly colloquium, monthly trainee roundtable (focusing on professional development and human subjects issues and grant pre-reviews), and annual research presentation days. These didactic/interactive experiences will be open to all T32 trainees, and we will actively encourage their participation.

It is important to note that the inter-leaving of the Pepper Center and T32 is not a new activity. For the past seven years, the Pepper Center and its administrative home (Institute on Aging) have provided colloquia and workshops for our trainees.

Finally, to facilitate collaboration between the Pepper Center and the T32 pre-doctoral program, I will agree to be a member of the Graduate Recruitment and Training Committee (Team Leader for Didactics). This will facilitate close communication between the Pepper Center and T32 programs, and ensure that educational programming is set up to maximize the training needs of current trainees.

I look forward to continuing this T32 with you. Please contact me for any further information.

Sincerely,



Christiaan Leeuwenburgh, PhD

University of Florida
Institute on Aging
Professor, Department of Aging and Geriatric Research, College of Medicine
Chief, Division of Biology of Aging
Leader Research Career Development Core of the Claude D Pepper Older American Independence Center
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May 22, 2013

Dr. Michael Marsiske
Department of Clinical and Health Psychology
University of Florida
PO Box 100165, 1225 Center Drive, Rm. 3150
Gainesville, FL 32610-0165

Dear Michael:

We have been close collaborators for the past four years, so I am delighted to accept your invitation to strengthen that collaboration by involving myself in the T32 program as a mentor and Team Leader for your Graduate Recruitment and Training Committee (GRTC).

While my own work has not explicitly been in aging, it has been heavily focused on two aging-relevant topics: (a) the evaluation of cultural sensitivity, and the implementation of culturally sensitive practices in health care, and (b) the development, test and refinement of culturally sensitive, customized, community-engaged health promotion strategies for low income African Americans. You have been working closely with me on both of those (primarily providing methodological, psychometric, and design-related consultation), but you have also been working to integrate me into the University of Florida Institute on Aging. In this latter vein, I have helped you (in your role as Core Leader for our Pepper Center Recruitment, Retention and Adherence Core) with community outreach of prospective older participants. In addition, we are engaged in a planning process for the development of both an exploratory NIH-funded health disparities center for UF, and (longer-term) an NIA-funded RCMAR Center.

In the GRTC, I understand that I will be the Team Leader for Diversity. In this role, I will (a) assist in developing recruitment strategies for identifying promising trainees from under-represented groups; (b) assist in implementing the strategies described in the proposal; (c) consult in the evaluation and retention of trainees; and (d) make suggestions to ensure that the research of trainees is both culturally sensitive and inclusive, to the best extent possible.

I bring significant expertise and strength to this T32. Recently, I was named the first Blue Cross and Blue Shield Endowed Chair in Health Disparities Research at the University of Florida. This is endowed by a \$1.5M gift from Blue Cross and Blue Shield to the University of Florida. In this new role, I will have the opportunity to guide UF's cross-disciplinary work in health disparities, including work to transition the UF Health Disparities Research and

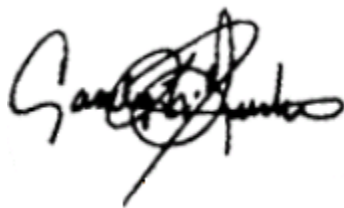
Intervention Program to the status of a funded Center. The Blue Cross and Blue Shield of Florida Endowed Chair in Health Disparities Research will be the face of health disparities research at the university and will be expected and encouraged to be the primary contact with key state and national legislators, federal funding agencies and state and national media on the subject, thus providing leadership not only to the University of Florida, but to the state and national community as well.

I have 30 years of experience conducting culturally sensitive community-participatory health promotion and health care research in racial/ethnic minority and low-income communities. My research has resulted in a number of tools and strategies for empowering people to modify and prevent overweight/obesity and engage in general health promoting behaviors under whatever conditions that exist in their lives. My grant-funded projects include the Family Health Self-Empowerment Program and the Health-Smart Church Program, and my grants to date have totaled over \$10 million dollars. I have over 90 published refereed journal articles and numerous other publications, including one book.

I have been honored to be the recipient of numerous awards and honors, as shown in my biosketch, but I am most proud of the fact that under my mentorship 42 doctoral students have received their Ph.D. degrees (42% of whom are racial/ethnic minorities), and 40 graduate students have received their Master's degrees (50% of whom are racial/ethnic minorities). I am told that, quantitatively and in terms of diversity, my doctoral research mentoring record is the best at the University of Florida.

Thus, in its focus on diversity and on doctoral student training, this T32 program fits clearly with my personal and professional goals. I am happy to be involved.

Sincerely,

A handwritten signature in black ink, appearing to read 'Carolyn M. Tucker', with a stylized, cursive script.

Carolyn M. Tucker, Ph.D.
BCBS Endowed Chair in Health Disparities
Research Distinguished Alumni Professor
Richard and Thelma O. C. Barney Term Professor of Health Disparities, College of Medicine
Director, UF Health Disparities Research and Intervention Program
UF Research Foundation Professor
Professor, Department of Psychology
Professor, Department of Community Health and Family Medicine
Affiliate Professor, Department of Pediatrics



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May 22, 2013

Dr. Michael Marsiske
Department of Clinical and Health Psychology
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Gainesville, FL 32610-0165

Dear Michael:

It gives me great pleasure to continue working with you on our T32 “Physical, Cognitive and Mental Health in Social Context”. As you know, I was one of the founding developers of our programming (stemming back to our joint work in developing a similar program at Wayne State University), and I have played a role as a member of your Graduate Recruitment and Training Committee (GRTC) and as a Mentor. We functioned as an unfunded program, developing our operating principles, starting in 2000, and seamlessly moved into the funded program beginning in 2003.

As a member of your GRTC, I agree to serve as the team leader for student tracking and progress review. In this role, I’ll ensure that all trainees have their triannual mentoring committee meetings, and I will review their progress reports. In our monthly GRTC meetings, we’ll review all trainees, and flag any issues or concerns that need to be further addressed. I’ll also work with you and the rest of the GRTC on student recruitment and retention issues.

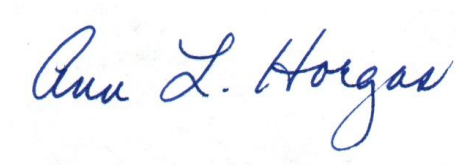
I believe I have relevant role experience for playing this function. Not only have I previously played this role for the T32/GRTC (prior to 2004), but from 2002-2010 I served as the Associate Dean for Research in our University of Florida College of Nursing. In that role, I developed goal statements, tracked productivity, and mentored junior faculty and doctoral students. I will leverage much of this experience for the T32.

Substantively, my work is tightly aligned with the focus on aging and the prevention of disability. Much of my research has focused on nursing home environments, both in the area of behavior management of problem behaviors (a focus that is aligned with our external advisory board member, Dr. Ann Kolanowski), but I have also worked extensively on the issue of medication use – particularly analgesic use – in older adults. Some of our work (including some done with our past trainee, Amanda Floetke Elliot, Ph.D.) suggests that effective pain management may serve as an intervention for the reduction of problem

behaviors in persons with dementia. More recently, as co-PI of the University of Florida site of the ACTIVE study, we have been working on identifying the role of prescription medications in influencing cognitive training outcomes and predicting disability trajectories in study participants.

The UF T32 model is a strong one, because of its focus on mentorship contracts, productivity goals, and its provision of “value added” didactic and practical experiences that trainees would not get in their disciplinary programs. I am excited to continue this model with future cohorts of scientists in training.

I wish us all luck with this proposal,

A handwritten signature in blue ink that reads "Ann L. Horgas". The signature is written in a cursive style with a large, stylized 'A' and 'H'.

Ann L. Horgas, PhD RN FGSA FAAN
Associate Professor

UF Administrative and Financial Commitment Letters



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May 21, 2013

Dear Michael:

I am writing this letter in my capacity as your Chair in the Department of the University of Florida Department of Clinical and Health Psychology. As I wrote last year, in your original submission, one of my first initiatives since arriving as Chair (in 2011) was to increase our top-ranked department's participation in NIH's Kirchstein NRSA program. Specifically, increasing the number of applications to various NIH T32 programs was a signature emphasis of my first year.

Before I detail my commitment to this T32, I also want to address several changes since last year (with regard to your qualifications as training director). Since you last submitted, you have received (a) The University of Florida Research Foundation Professorship, 2012-2015, in recognition of your excellence in scholarship); (b) you were named, by our Graduate School, one of five University of Florida Doctoral Mentoring Award winners, in recognition of your profound commitment to doctoral mentorship, and your substantial successes in student training and placement.

Your reviews on the previous submission also questioned your status as an Associate Professor. I want to clarify a few points. First, you were tenured in 2007; thus, you have only been at the current rank and permanent status for six years. Second, in accordance with your reviewers, I agree that the next logical professional step for you would be to seek promotion to Full Professor. You are encouraged to seek this status when ready, and I have encouraged you to think about submitting your promotion packet in the Fall of 2013. Your productivity in publication and grantsmanship, including several new submissions in Summer 2013, should be useful as you seek promotion.

Why was this so important to me? T32s offer lots of benefits for their institutions. Obviously, they provide support to students. More importantly, they create a mechanism for bundling together course, mentors and research projects into a "value added" problem-focused training program that goes well beyond what any traditional disciplinary training

program can do. Third, T32 programs encourage multidisciplinary collaboration, and that is a wonderful way to fuel the research engine of our department. Fourth, T32 programs constitute one of the highest levels of peer review that our educational program can get—if we are competitive for T32 funding, then we are doing our job on the national scene.

When I arrived, your T32 was the only such award in our department. For the past ten years, your T32 has provided a remarkable base of support for the many aging-focused students who rotate through our department and throughout the university. Beyond the T32, I know you share my commitment to training, because you have also sponsored two individual NRSAs, two diversity-enhancement dissertation awards (R03, R36), and two diversity supplements on your own grant. Improving the diversity of our training is another signature initiative of our department, and as your proposal section on Commitment to Diversity and your Recruitment plan clearly outlines, this department is 100% behind you, and will do everything in its power to help you recruit and retain a strong, diverse training corps. We are very excited.

Your proposal contains many enthusiastic letters. I want to call attention to a few of them. First, our Dean has laid out a remarkable commitment: Residual tuition (not covered by the T32) will be paid, and an a cash amount equivalent to 50% of your trainee stipend costs for one year will be set aside to provide additional research support. This shows true commitment to our training mission and this T32 at the highest levels of our university administration.

Second, you have letters from Dr. Marco Pahor (Director of our Institute on Aging) and Dr. Ronald A. Cohen (incoming Director of our Cognitive Aging and Memory Program). Both of these leaders represent a substantial university commitment to aging, as well as a phenomenal record of success in procuring aging funding. The Institute on Aging alone has acquired a major multi-center clinical trial of exercise promotion for frail elders, an NIA-funded Pepper Center, and even building funds to support our new Institute on Aging building (described elsewhere in your proposal). UF is solidly behind aging research, and your trainees are benefiting from the resources and infrastructure available.

As Dr. Perri outlined, and I want to augment, the department makes the following commitments to this T32 program:

- (a) To continue to administer the grant through our Department of Clinical and Health Psychology. This includes assignment of staff to complete (i) NIH-based appointment and termination letters, as well as annual progress reports; (ii) academic appointments, including registrations and conduct of tuition transactions; and (iii) personnel actions (i.e., hiring and payroll actions within the UF Human Resources section)
- (b) To support the many departmental faculty listed as mentors in this grant to serve as mentors and meet the obligations set forth in the proposal. This represents a significant investment of faculty time, but we believe it clearly reflects our college mission with regard to multidisciplinary doctoral training
- (c) To provide you with staff support to pursue significantly enhanced goals in to improve the diversity of your student recruitment, and to aid you with retention of top

- scholars in your program
- (d) To personally provide you with the time needed to serve as the Training Director of this award, as we have for the past ten years.

I have personally administered T32 programs, and I know exactly what it takes for them to succeed. I am, in this letter and privately, pledging that you will get the staff, logistical, and mentorship needed to continue and expand your training program. I am excited for all of us, and I sincerely hope this T32 program continues for another five years.

Sincerely,

A handwritten signature in black ink, appearing to read "William W. Latimer". The signature is fluid and cursive, with a long horizontal stroke at the end.

William W. Latimer, PhD, MPH
Elizabeth Faulk Professor and
Chair of the Department of Clinical and Health Psychology



College of Public Health and Health Professions
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May 21, 2013

Dr. Michael Marsiske
Department of Clinical and Health Psychology
University of Florida
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Dear Michael:

For the past ten years, your NIA-funded T32 predoctoral program, "Physical, Cognitive, and Mental Health in Social Context," has been a signature program in our College. It is a model of multidisciplinary research training that is focused on scholarly productivity and the development of a new multidisciplinary core of scholars. Your trainees specialize in research on (a) antecedents of independent functioning in later life, and (b) design and evaluation of interventions for the prevention of disability in the later years. The training grant takes an inherently biopsychosocial model, and that aligns perfectly with our College. The College has been pleased to host and support your award and, if re-funded, we will enthusiastically continue to do so.

Before describing why our College is an ideal host, I want to highlight a few significant commitments we are making to this training program: If you are re-funded, we make the following commitments:

- (a) To continue to administer the grant through our Department of Clinical and Health Psychology. This includes assignment of staff to complete (i) NIH-based appointment and termination letters, as well as annual progress reports; (ii) academic appointments, including registrations and conduct of tuition transactions; and (iii) personnel actions (i.e., hiring and payroll actions within the UF Human Resources section)
- (b) To support college faculty listed as mentors in this grant to serve in this capacity and meet the obligations set forth in the proposal. This represents a significant investment of faculty time, but we believe it clearly reflects our college mission with regard to multidisciplinary doctoral training
- (c) The Office of the Vice President for Research has agreed to cover the residual portion of graduate tuition not paid by the grant (i.e., 40%).

- (d) To help insure the continued success of your Training Program, the College of Public Health and Health Professions will provide financial support of \$136,683 distributed over the length of the grant (5 years). This support can be utilized to cover students during their first year of training, organize seminars, the annual symposium or to optimize your recruitment efforts.

Our College is uniquely positioned to serve as the academic home for this T32 program. The College of Public Health and Health Professions is one of the largest and most diversified health education institutions in the nation. Established in 1958, the College of Public Health and Health Professions was the first college in the United States dedicated to educating students of many different health professions. Today, Public Health and Health Professions is one of six colleges that comprise the University of Florida Health Science Center. The other colleges are Dentistry, Medicine, Nursing, Pharmacy, and Veterinary Medicine. The College of Public Health and Health Professions is a national leader in the education of health professionals. Currently, students are educated in the fields of Clinical and Health Psychology; Health Science; Health Services Administration; Health Services Research; Occupational Therapy; Physical Therapy; Public Health (Social and Behavioral Science); Public Health (Environmental and Global Health); Rehabilitation Counseling; Rehabilitation Science; and Speech, Language Pathology and Audiology. The College of Public Health and Health Professions places emphasis on the development of intellectual resources and skills enabling our graduates to prosper in today's complex health delivery systems. In addition, the College is committed to the development of cutting edge science in areas such as health and behavior, the rehabilitation of central nervous system impairment, and health systems functioning.

The College of Public Health and Health Professions (PHHP) is located in the Health Professions, Nursing, and Pharmacy (HPNP) building, which was completed in 2003. The PHHP classroom space comprises 11 classrooms, 4 lecture halls, 1 auditorium, and 1 distance learning room, a total of 7,783 square feet. Teaching Labs provide audio/visual (A/V) services in the HPNP building, and on-site staff are capable of diagnosing and repairing common A/V problems quickly. They have a cache of commonly used equipment readily available to address A/V needs not met by the equipment already in the classrooms. Standard equipment in each classroom includes a podium and computer access to the web and for PowerPoint presentations, and additional A/V equipment (projectors, TV/video, etc.) can be requested. The Health Science Center has an Access Grid node in rooms C1-11 in the Communicore Building. This facility uses Internet2 technology to create collaborative video interactions with multiple remote sites. There is no charge to use the node and conferences are scheduled through the Teaching Labs.

Dr. Michael Marsiske

Page 3

The UF HSC is planning to expand its Access Grid capability by providing switching mechanisms to allow other video-equipped rooms to participate in Access Grid events. Several conference/meeting rooms are available in the Public Health and Health Professions Research Complex (see below) that are available for use by any PHHP faculty/laboratory. The rooms are scheduled using Outlook software. There are 2 large conference rooms with the capacity to hold 20-25 individual. These conference rooms come equipped with a projection screen, whiteboard, network port, and conference calling capability. Additional office space can be allocated with approval from the Dean's Office.

As previously mentioned, the College of PHHP also includes the Public Health and Health Professions Research Complex, which is located in the Dental Wing (Ground Floor) of the Health Science Center, and totals 15,690 square feet of dedicated research space. Assignment of researcher space is managed by the Associate Dean for Research and is reviewed on an annual basis.

Your training model has many components that, together, should position it well for success. This includes: (a) assignment to a primary mentor with a strong research profile in aging; (b) support by a multi-disciplinary mentorship team focused on productivity and professional development; (c) development of an annual mentorship contract that specifies quantifiable goals in the areas of research, education, and service for each trainee; (d) didactic support in the form of weekly colloquia and monthly professional development roundtables (in collaboration with the Institute on Aging); (e) requirement that students complete a Graduate Certificate in Gerontology (with coursework in biopsychosocial aspects of aging); (f) requirement that students take at least 11 credits of advanced statistics and methodology; (g) participation in annual conferences in aging; and (h) completion of human subjects training at multiple levels.

We enthusiastically look forward to supporting you and your trainees for another five years. We wish you the best of luck in this submission.

Sincerely,

A handwritten signature in cursive script that reads "Michael G. Perri".

Michael G. Perri, PhD, ABPP

Dean, College of Public Health and Health Professions

Robert G. Frank Professor of Clinical and Health Psychology



College of Medicine
Department of Aging and Geriatrics Research
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Dr. Michael Marsiske
Department of Clinical and Health Psychology
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May 21, 2013

Dear Michael:

I am pleased to learn that you will be submitting a competing continuation for your NIA-funded predoctoral T32 program, "Physical, Cognitive, and Mental Health and Social Context". I am further pleased that, as the program has evolved, you are further interleaving the goals of your T32 with that of our NIA-funded Claude Denson Pepper Older Americans' Independence Center. Specifically, you are focusing specifically on multidisciplinary research training on (a) the antecedents of functional independence in older adults, and (b) investigation of potential interventions for the prevention of disability. Substantively, I understand that the majority focus of your proposal lies largely with mobility and cognitive contributors to late life independence, and this merges very well with our Pepper goals.

The mission of the University of Florida Older Americans Independence Center (OAIC) is to assess the risk factors of physical disability in older adults, develop and test effective prevention therapies, and train new investigators in research on aging and disability, while developing their leadership qualities. Our strategy is to attract studies and investigators from diverse behavioral, clinical, and basic science disciplines towards research on aging that is focused on a common research theme, and this, in turn, allows us to accomplish our mission. The theme, "sarcopenia and prevention of disability", is pursued using an interdisciplinary approach that traverses the entire spectrum of biomedical investigation, including molecular biology, animal studies, clinical research, behavioral sciences, and epidemiology. This research theme addresses the general goal of the OAIC program, namely, to increase scientific knowledge that leads to better ways to maintain or restore independence of older persons. Our research objectives are to (1) assess, using translational research (between basic and clinical disciplines) multiple factors such as biological, co-morbid, psychosocial, and behavioral that contribute to sarcopenia, physical function decline, and progression to disability and (2) develop and reliably test in clinical and pre-clinical studies interventions that target sarcopenia, in order to prevent, delay or recover the age-related declines in physical function and the progression to disability. To address these objectives the proposed OAIC includes the following integrated cores, which support investigators, Junior Scholars, infrastructure, and services: the Leadership and Administrative Core, the Research Career

Development Core, the Pilot I Exploratory Studies Core, the Clinical Translational Research Core, the Metabolism and Biomarkers Core, the Biostatistics and Data Management Core, and the Recruitment, Adherence and Retention Core. We train Junior Scholars and support external studies, research development projects, and pilot/exploratory studies. A major strength of the proposed OAIC is the concerted action of the interdisciplinary cores, projects and investigators that address one common research theme to be explored through the whole spectrum of biomedical investigation.

Our University of Florida Institute on Aging, and its embedded Department of Aging and Geriatrics Research, is a university-supported umbrella center, charged with organizing all research at the University of Florida. We serve as the support infrastructure for aging research on campus, and as academic home for faculty members from diverse disciplines who wish to pursue a career primarily focused on aging and independence. The Department and Institute's mission is to improve the health, independence and quality of life of older adults by means of interdisciplinary teams in the areas of research, education and health care. The Department has four divisions: the Division of Biology of Aging, Division of Career Development and Education, Division of Clinical Research, Division of Geriatric Medicine

We are also pleased to announce a new Cognitive Aging and Memory Clinical Translational Research Program. Led by Ronald Cohen (one of your mentors), and supported in part by the McKnight Brain Research Foundation, the program will integrate behavioral, neuroscience, and geriatric perspectives on late life cognitive health, and will support basic and clinical research, as well as clinical trials, for the promotion of cognitive independence in older adults. This squares very nicely with the interests of many of your trainees, and will be a major new resource for them.

We are already well integrated with the T32. In addition to you, a number of our core faculty members (Drs. Anton, Buford, Cohen, Manini, Nayfield, as well as me) are already part of your T32 faculty, and several of your students interact with our core faculty members and/or are directly mentored by them (Torrance Higgins, Wajiha Akhtar). Past trainees (Vonetta Dotson, Zvinka Zlatar) have been funded by our Center or supplement awards attached to our Center, so we have a strong record of productivity and collaboration.

1. If the training grant is re-funded, we will maintain our existing commitments to the program: (a) Dr. Leewenburgh's Professional Development core of our Pepper Center will continue to provide weekly colloquium and monthly professional development roundtables that your students may attend
2. (b) Your trainees will be invited to any special aging programs that we offer (e.g., our annual Aging Scholars research day), or other special talks and colloquia
3. (c) Faculty who are on budget with the Institute on Aging and its allied programs (Anton, Buford, Cohen, Manini, Nayfield, Pahor) will continue to serve as active mentors in your program
4. (d) To the extent that trainees are engaged in research on Pepper-supported studies or with Pepper-supported scholars, they will have access to our research laboratories and infrastructure.

We have been much enriched by this training program, and we look forward to continuing to

support the development of next-generation predoctoral fellows with a focus on independence-promotion in future cohorts of older adults. I wish you the best of luck with this competing continuation of your ten year program.

Sincerely,

A handwritten signature in black ink, appearing to read 'Marco Pahor', written in a cursive style.

Marco Pahor, MD
Professor and Chair
Department of Aging and Geriatric Research
College of Medicine
Director, Institute on Aging



College of Medicine
Department of Aging and Geriatrics Research
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Cognitive Aging and Memory Clinical Translational Research Program

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May 21, 2013

Dear Michael:

Among the many reasons I am glad to join the University of Florida is your ongoing T32 predoctoral program, funded by NIA, entitled, "Physical, Cognitive, and Mental Health and Social Context". I understand that your program is tightly integrated with our University of Florida Institute on Aging, and that the T32 provides multidisciplinary research training on (a) the antecedents of functional independence in older adults, and (b) investigation of potential interventions for the prevention of disability.

In a few weeks, I will be joining UF as the leader of UF's new Cognitive Aging and Memory (CAM) Clinical Translational Research Program. Supported in part by the McKnight Brain Research Foundation, the program will integrate behavioral, neuroscience, and geriatric perspectives on late life cognitive health, and will support basic and clinical research, as well as clinical trials, for the promotion of cognitive independence in older adults. As Dr. Pahor noted in his letter, his integrates very nicely with the interests of many of your trainees, and will be a major new resource for them.

Dr. Pahor's letter explains, at length, what the UF Institute on Aging and Pepper Center are, so I will not rehash that. Suffice it to say that your trainees will be excellently supported by a mix of didactics and laboratory facilities, as documented in your "resources" section.

I am well poised to serve as a mentor for your trainees, and I look forward to doing so. Prior to my arrival at UF, I served as a professor of psychiatry and human behavior at The Warren Alpert Medical School of Brown University and director of neuropsychology at The Miriam Hospital. In addition to authoring more than 150 publications, I authored the book *Neuropsychology of Attention*, which went to a second edition. Specifically with regard to aging, I served as co-editor on the book *Vascular Dementia: Cerebrovascular Mechanisms and Clinical Management*, and I edited the books *Neuropsychology and Cardiovascular Disease* and *Brain Imaging in Behavioral Medicine and Clinical Neuroscience*.

My own research interests focus on achieving greater understanding of the relationship

between brain disturbances and behavior and cognitive function. Specific areas of investigation include studies of the link between cardiovascular disease and the development of cerebrovascular disturbances, and neuropsychological dysfunction in the context of aging .His research has a similar focus with respect to the neuropsychology of HIV infection on the brain.

I am also actively involved in neuroscience research studies of CVD risk factors, including obesity, metabolic syndrome, exercise, smoking and other substance abuse, with all of this work focusing on the brain functions underlying these conditions. I am on the editorial board of three primary journals in the field of neuropsychology as well as the journal Brain Imaging and Behavior and I am a permanent member of the behavioral medicine study section of the NIH. My laboratory has been heavily involved in the training of predoctoral interns and postdoctoral fellows within the Centers, as shown elsewhere in your proposal.

Based on this substantial overlap, I make the following commitments:

1. If the training grant is re-funded, trainees may participate in all didactics (seminars, workshops, roundtables, etc.) that we offer;
2. Faculty who are recruited to the CAM program will be encouraged to become involved in the T32 program, and to serve as mentors if appropriate;
3. Trainees who participate in research supported by our CAM center will have full access to CAM laboratory, computer, and other resources associated with that research.

Best of luck in your submission!

Sincerely,

A handwritten signature in black ink, appearing to be 'R. Cohen', followed by a long horizontal line extending to the right.

Ronald A. Cohen, Ph.D., ABPP, ABCN
Professor, Aging & Geriatrics Research, Neurology, and Psychiatry
Director, Cognitive Aging and Memory (CAM) Clinical Translational Research Program



Office of the Senior Vice President, Health Affairs
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May 17th, 2012

Michael Marsiske, Ph.D.
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RE: University of Florida predoctoral T32 application to National Institute on Aging “Physical, Cognitive and Mental Health in Social Context”

Dear Dr. Marsiske:

Congratulations on approaching Year 10 of your NIA-funded predoctoral training program, “Physical, Cognitive and Mental Health in Social Context.” The training program has been an important component of our institutional focus on aging, and the niche your program occupies is unique. Specifically, while the University of Florida has enjoyed substantial support for aging research (as detailed more below), your training program has uniquely staked out research on the *behavioral and social* contributors to independence and prevention of disability in old age. As such, it is complementary to our NIA-funded Pepper Center’s focus on the prevention of disability, but its particular focus on cognitive, emotional, social, and biobehavioral (e.g., exercise) contributions to independence adds nicely to our profile of geriatric, pharmacological and basic science research on aging.

Your model of mentored trainees, supported both by a primary disciplinary mentor and multidisciplinary mentoring team, is ideal. Particularly effective is the formation of a written mentorship contract, triannual progress reports, and a graduate training committee that oversees student progress – and intervenes when needed. You are well supported by didactic and practical experiences. You have a world-class faculty to support your training goals. Many of your past trainees are now at top institutions, conducting funded research in aging and allied topics, and serving as teachers and mentors of next generation researchers.

UF is well positioned as a national leader in aging research. UF, under the direction of Dr. Marco Pahor, is wrapping up the end of its first five-year cycle of funding with an NIA-funded Claude Denson Pepper Older Americans’ Independence Center. Leveraging that Center and its strong collection of investigators, funded aging scholarship, training, and infrastructure on this campus approaches \$100 million. I am aware that you and many other T32 mentors in this proposal are tightly integrated with this center, collaborating on several major investigations (e.g., the NIA-funded LIFE study of exercise effects on mobility and independence in frail elders), and that you personally serve as the Core Leader of the Recruitment, Retention, and Adherence Core of the Pepper Center. In the appendix to this letter, I provide much more detail on our Pepper Center and strengths in aging research. Clearly, aging has emerged as one of the signature strengths of the UF campus.

The Foundation for The Gator Nation

An Equal Opportunity Institution

We provide substantial support to the Pepper Center in the form of departmentally funded research, multiple staff support positions, physical and laboratory space (including the Health Promotion Center, the Aging Research and Rehabilitation Center, and the administrative offices of the Institute on Aging) and clinical support for the Institute on Aging. The Pepper Center further supports your training with their weekly colloquium series (as detailed in the proposal) and their monthly trainee round-tables, in which your trainees participate. Many of our faculty also teach Gerontology Certificate programs which are taken by your trainees.

Your program also includes many young investigators with interests in cognitive aging and the aging brain. These trainees will interface well with our McKnight Brain Institute, as well as our newly-launched Program in Cognitive Aging and Memory (a joint program of our Institute on Aging and our McKnight Brain Institute, directed by Ronald Cohen, PhD, ABPP, ABCN). I am pleased that Dr. Cohen is a mentor and participant in your T32, and his laboratory and scientific resources will be a real benefit to your trainees. We are providing significant startup support (in terms of personnel, facilities, and direct investment) for this new program.

Our Clinical and Translational Science Institute (CTSI) provides further support, including in issues of Clinical Trial registration, methodological consultation, research and compliance support, and clinical research facilities. These are all available to your T32 trainees and their mentors. The CTSI enthusiastically supports your T32 application and will make available administrative support, core facilities, grants management, database and IRB support, and appropriate biostatistical support. In addition to what our aging institute offers, the CTSI provides a series of seminars and graduate courses which are available to your potential T32 fellows, including those focused on ethics of research, advanced design of clinical trials, to grant-writing and translational research methods.

We look forward to a continuation of this successful program and, as this letter signifies, offer substantial support to ensure that future trainees have the best possible environment in which to develop into productive aging researchers.

Forward Together,

A handwritten signature in cursive script, reading "David S. Guzik".

David S. Guzik, M.D., Ph.D.
Senior Vice President, Health Affairs
President, UF&Shands Health System

Appendix: Aging at University of Florida

Dr. Marco Pahor was recruited to UF in 2005, having been highly successful in directing a Pepper Center at Wake Forest University. His task at UF was to direct a redesigned Institute on Aging, and a new Department of Aging and Geriatric Research in the College of Medicine, toward the major goal of establishing a Pepper Center at UF. There were major strengths at UF in the area of aging, particularly in basic and behavioral sciences.

Initially, it was thought that it would take two to four years to submit a competitive application. With the help of newly recruited investigators, however, along with strong institutional support and the enthusiastic participation of existing UF researchers across several colleges, including Dr. Beyth, Dr. Carter, Dr. Daniels, Dr. Duncan, Dr. Leeuwenburgh, Dr. Marsiske, Dr. Perri, Dr. Scarpace and Dr. Shenkman, Dr. Pahor and his team worked on an accelerated timeline to build the necessary infrastructure. The Pepper Center application was submitted in October 2005, just nine months after the start-up of the new restructured UF Institute on Aging. It was funded on the very first submission, a highly unusual accomplishment at NIH.

Human aging is associated with progressive decline in skeletal muscle mass, a downward spiral that often leads to decreased strength and functionality. In 1989, Irwin Rosenberg proposed the term “sarcopenia” (Greek “sarx” or flesh + “penia” or loss) to describe this age-related decrease of muscle mass. Sarcopenia has since been defined as the loss of skeletal muscle mass and strength that occurs with advancing age.

The UF Pepper Center has focused on the theme: “Sarcopenia: prevention and rehabilitation of disability.” This central theme is pursued using an interdisciplinary approach that traverses the entire spectrum of biomedical investigation, including molecular biology, animal studies, clinical research, behavioral sciences and epidemiology. The specific research objectives of the UF Pepper Center are to:

- (1) assess, using translational research, multiple domains, including biological, co-morbid, psychosocial and behavioral factors, that contribute to sarcopenia, physical function decline and progression to disability; and
- (2) develop and reliably test, in clinical and pre-clinical studies that target sarcopenia, interventions that prevent, delay or recover age-related declines in physical function and their progression to disability.

To address these objectives, the UF Pepper Center includes the following integrated cores, which support investigators, junior scholars, research infrastructure and services:

- Research Career Development
- Pilot Studies
- Clinical and Translational Research
- Metabolism and Biomarkers
- Biostatistics and Data Management
- Recruitment, Adherence and Retention Core
- Leadership and Administrative Services

A major strength of the UF Pepper Center is the concerted action of the interdisciplinary cores, projects and investigators to address a common research theme that is explored through the entire spectrum of biomedical investigation.

Successful Progress

The first submission of the Pepper Center grant represented a promise of success. The outstanding review in the competitive renewal application testifies that the initial promise was achieved, and that the future will be filled with additional success.

During the initial funding period, the UF Pepper Center supported three research development projects and 19 pilot and exploratory studies. More important, Center investigators were extremely productive in leveraging the pilot studies to submit larger independent grants during the initial funding period (four years to date). As a result of pilot studies, research development projects and their core support, 32 grants have been funded, seven grants are pending and six grants are in preparation.

Counting other grants in which the UF Pepper Center plays a supportive role, a total of 80 active grants are connected to the Center, with total funding of more than \$177 million. Of the 80 active grants, 21 were awarded in the past 12 months. Moreover, a total of 38 grants linked to the Pepper Center have already been completed, with total funding of about \$42 million. The total impact of Pepper Center on UF aging-related grants over a period of three and a half years has been 118 grants and about \$219 million in funding.

The scientific productivity of Center scholars has translated into a prodigious list of peer-reviewed papers. Since inception, faculty in the UF Pepper Center contributed 502 papers that have been published or are in press in peer-reviewed journals. A total of 186 of these papers were produced in 2010.

Since inception, the Research Career Development Core has supported 11 Junior Scholars who have demonstrated outstanding productivity, and provided mentorship to a pool of 41 affiliate scholars. These affiliate scholars serve as a pool for recruiting the most talented and promising future Pepper Center Junior Scholars.

LIFE Study

The most important study that has been associated with the Pepper Center is the "LIFE" study, or Lifestyle Interventions and Independence for Elders. We all know that physical activity is good for our health, but in older individuals definitive evidence is lacking that exercise can promote independence, prevent disability, and improve cardiovascular and cognitive functioning. To fill this important gap in our knowledge, which has significant implications for clinical practice and public health, the LIFE study was awarded to UF (with Dr. Pahor as P.I.) by the National Institute on Aging (NIA). At \$64 million over six years, plus a \$9 million supplement from the NHLBI, this study represents among the largest awards issued in the history of the NIA, and is the largest NIH grant ever received by UF.

The LIFE Study is a multicenter randomized controlled trial designed to compare a moderate-intensity physical activity program with a successful aging health education program in 1,600 sedentary older persons who are followed for an average of 2.7 years at eight sites nationally. The primary outcome is major mobility disability, defined as inability to walk 400 meters. Additional outcomes include cognitive function, serious fall injuries, disability in activities of daily living, sleep-wake disturbances, dyspnea, ventilatory capacity, cardiopulmonary events, cardiovascular events and cost-effectiveness. The UF site is contributing 200 participants from the University of Florida (Gainesville) and Brooks Rehabilitation Research Center (Jacksonville) and is second in recruitment among the eight sites. Currently, the LIFE study has recruited more than 1,100 participants and is ahead of the recruitment schedule with excellent adherence and retention, all quite unusual for a large multicenter study.

The LIFE study is the result of over 10 years of planning, pilot projects and preliminary data. It takes advantage of all Pepper Center cores, collaborates with the other four Pepper Centers and is well-integrated into the UF CTSI, which supports the bio-specimens repository.

Institute on Aging and CTRB Building

Another important outgrowth of the Pepper Center is a C06 construction grant for the Institute of Aging Building, which then led to the Clinical and Translational Research Building, for which there will be a ribbon-cutting ceremony on May 26, and about which there will be more to tell in a newsletter at that time. Suffice it to say that the Pepper Center was integral to UF's successful application to NIH for a \$15 million construction grant for the 40,000-square-foot Institute on Aging Building, and was also an important element in our successful CTSA award, which prompted the plan to add an 80,000-square-foot wing, thus creating a 120,000-square-foot Clinical and Translational Research Building.

Plans for the Future

The decline in mobility and sarcopenia are virtually universal characteristics of aging, regardless of species. Common fundamental biological mechanisms that likely contribute to the age-related locomotor function decline and sarcopenia include decreased apoptosis or "programmed cell death" in skeletal muscle due to deficits in energy production by the mitochondria in these cells. A future direction of the Pepper Center, led by Dr. Leeuwenburgh, Professor of Biology of Aging, will be to assess deficits in mitochondrial energy production and consequent skeletal muscle apoptosis due to a variety of factors such as inflammation and oxidative stress. Moreover, the impact of fat cells on inflammation, oxidative stress, apoptosis and energy deficits, and the consequential impact on sarcopenia and functional limitations, will also be explored. These mechanisms have not been previously investigated in a comprehensive multidisciplinary approach that integrates epidemiology, behavioral, clinical and basic research. By identifying biological processes that can be favorably influenced by lifestyle modification, it is hoped that some of the effects of aging on sarcopenia, locomotor and other functional impairments can be mitigated.

In summary, the UF Pepper Center's ongoing and planned clinical studies, along with the future translational research described above, hold promise for fostering enhanced independence and an improved quality of life as we grow older. This program will yield positive results for citizens of Gainesville, and of Florida in general, and can only enhance the luster of the University of Florida.



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May 18, 2012

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RE: University of Florida Predoctoral T32 Application to National Institute on Aging
"Physical, Cognitive and Mental Health in Social Context"

Dear Dr. Marsiske:

The Office of the Provost heartily supports and endorses your application for a competing continuation of your NIA-funded T32 program. My office has identified increasing NIH training grant support as a key initiative for strengthening and improving the quality of UF's doctoral programs. Your ten years of support have served as an important model and standard bearer for top-notch research training of our doctoral students.

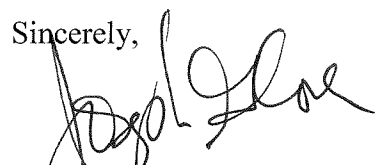
I will not detail here the enormous strengths UF offers in terms of aging research (your proposal and Dr. Guzik's letter detail this extensively). I will note, however, that aging is tightly integrated into a number of our colleges and departments (College of Health and Human Performance: Applied Physiology and Kinesiology; College of Liberal Arts and Sciences: Departments of Psychology, Sociology, Anthropology and Geography; College of Public Health and Health Professions: Clinical and Health Psychology, Rehabilitation Sciences, Communication Sciences and Disorders, Epidemiology, Behavioral and Social Science, College of Nursing: Adult and Elderly Nursing; College of Medicine: Interdisciplinary Studies Program, Aging and Geriatric Research). With extensive growth in funded aging research (via our Institute on Aging) and infrastructure (including a new NIH-supported building for Aging Research), we are poised for even greater levels of accomplishment and strength.

I note, in addition, that you are leveraging the Graduate Certificate program in Gerontology as a didactic component of your training. This is a model program for multidisciplinary graduate training in aging. It is "value added," in that it permits student exposure to aging research and scholarship that they would not ordinarily get in their home departments.

As you know, my office has been working with the Senior Vice Presidents to determine how to best support predoctoral training grants. To help ensure the success of the proposal renewal application and assist with recruitment the institution will waive the residual tuition (that amount not supported by the T32) for all trainees appointed to the training grant.

We wish you every success in this application, and pledge to continue providing necessary academic, faculty and infrastructural support to continue your successful initiative in predoctoral training in aging.

Sincerely,

A handwritten signature in black ink, appearing to read 'Joseph Glover', written in a cursive style.

Joseph Glover
Provost and Senior Vice President



Clinical and Translational Science Institute

PO Box 100219
N1-17 JHMH
Gainesville, FL 32610-0226
352-273-8700

Dr. Michael Marsiske
Department of Clinical and Health Psychology
University of Florida
PO Box 100165, 1225 Center Drive, Rm. 3150
Gainesville, FL 32610-0165

May 21, 2012

Dear Michael:

I was glad to learn that you are proposing to submit a competing continuation of your ten-year NIA-funded T32 program, "Physical, Cognitive, and Mental Health in Social Context". I also understand that your focus is tightly integrated with that of one of our principal UF research partners, the Institute on Aging. To that end, your focus on research training in (a) identifying the antecedents of functional independence in later life, and (b) design, implementation and evaluation of intervention programs for the prevention of disability is well within our scope and mission. Your program aligns with our CTSI very well, in that it shares our model of interdisciplinary training and team science.

Your training model has many components that, together, should position it well for success. This includes: (a) assignment to a primary mentor with a strong research profile in aging; (b) support by a multi-disciplinary mentorship team focused on productivity and professional development; (c) development of an annual mentorship contract that specifies quantifiable goals in the areas of research, education and service for each trainee; (d) didactic support in the form of weekly colloquia and monthly professional development roundtables (in collaboration with the Institute on Aging); (e) requirement that students complete a Graduate Certificate in Gerontology (with coursework in biopsychosocial aspects of aging); (f) requirement that students take at least 11 credits of advanced statistics and methodology; (g) participation in annual conferences in aging; (h) completion of human subjects training at multiple levels.

The CTSI and Institute on Aging are becoming increasingly fertile ground to support your trainees, including in physical infrastructure. I am looking forward to being in the new 120,000 square-foot, LEED Platinum Clinical and Translational Research Building. Our building will be co-located with the Institute on Aging (a building funded, in part, by an ARRA grant to the University of Florida Institute on Aging by NIA/NIH), so that close collaboration will always be a few footsteps away.

The University of Florida, through participation in the NIH's Clinical Translational Science

Award program, has joined a prestigious national consortium of medical research institutions working to speed the transformation of scientific discoveries into medical advances for patients. The CTSI enthusiastically supports your T32 application and will make available administrative support, core facilities, grants management, database and IRB support, and appropriate biostatistical support. Your trainees will have access to these resources, be eligible to apply for CTSI pilot grants, and have access to the multiple training courses we offer.

I am writing to give my endorsement of the T32 proposal. I understand you are interested in a Pre and Post Doc Society here at UF I am too and would be interested in discussing with you how the CTSI could help with this as we are a hub of training activity at UF We also believe that trainees and fellows across the campus should get to know each other. A Society is one way for this to happen.

I hope you are successful with this T32. We can certainly use more funded fellows here at UF

Good luck on the submission.

Sincerely,

A handwritten signature in dark ink, appearing to be 'DN' or similar initials, written in a cursive style.

David Nelson, MD
Associate Dean for Clinical Research & Training
Director, Clinical and Translational Science Institute

External Advisory Board Letters



May 21, 2013

Dr. Michael Marsiske
Department of Clinical and Health Psychology University of Florida PO Box 100165, 1225 Center Drive,
Rm. 3150 University of Florida
Gainesville, FL 32610-0165

Dear Michael,

You recently asked me to serve as a consultant and member of your External Advisory Board for the NIA-funded predoctoral T32 training program on "Physical, Cognitive and Mental Health in Social Context", and I am happy to do so. I understand that your training program is tightly interwoven with the University of Florida Institute on Aging/Pepper Center, and therefore shares its emphasis on the prevention of disability and promotion of late life independence. This squares nicely with my own areas of expertise, so I believe I can be a very effective advisor to your group.

As you know, my own research examines the impact of nutrition, exercise and physical activity on successful human aging. In particular, I examine skeletal muscle alterations with advancing age in disabled and non-disabled populations, with a particular focus on age-related alterations in the control of skeletal muscle protein turnover.

I know that your training program aims to be multidisciplinary, and I am well equipped to advise you on doctoral training in such environments. Personally, I am a Professor of Nutrition here in the Gerald J. and Dorothy R. Friedman School of Nutrition Science and Policy at Tufts University, but I also hold appoints in Medicine and Physical Medicine and Rehabilitation, both at Tufts and at Harvard Medical School.

I understand that the thematic focus of the program is research training in the study of the antecedents of functional independence and disability, with a particular focus on cognitive and mobility-related interventions for the promotion of independence.

I understand that you are interested in my participation because of my expertise and experience with doctoral training in aging, my personal role as a nutrition and exercise scientist within a multidisciplinary research environment, and my understanding (based on my program of research) of the antecedents of, and some possible interventions for the, promotion of independence and the prevention of disability in older adults.

I have extensive experience in mentoring junior faculty, postdoctoral scholars and predocs. I like your focus on scholarly productivity in trainees (including the implementation of a mentoring contract that specifies quantifiable goals in the areas of research, education, and service), and I believe you have a nice mix of didactic and experiential training that provides significant "value added" beyond the disciplinary training that your students might receive.

I look forward to participating in annual program reviews, and your summaries of trainee progress, faculty/student participation, as well as your internal evaluations of strengths and weakness of the program. I think we will be able to dynamically "fine tune" the program each year to fit the evolving needs of your institution, and of gerontology/geriatrics more generally.

Congratulations on your past ten years of T32 funding; I express my best wishes for a continuation of your training program. It is clear that research on the predictors of, and potential interventions to prevent, functional disability in later life is of great public health importance. I'm glad that this is precisely where your training program aims to make a contribution.

Sincerely,

A handwritten signature in black ink, appearing to read "Roger A. Fielding". The signature is fluid and cursive, with the first name "Roger" and last name "Fielding" clearly distinguishable.

Roger A. Fielding, Ph.D.
Senior Scientist and Director
Nutrition, Exercise Physiology, and Sarcopenia Laboratory
Jean Mayer USDA Human Nutrition Research Center on Aging
Tufts University

Professor of Nutrition and Medicine
Friedman School of Nutrition Science and Policy
Tufts University School of Medicine

Associate Director
Boston Claude D. Pepper Older Americans Independence Center



Dr. Michael Marsiske
Department of Clinical and Health Psychology
University of Florida
PO Box 100165, 1225 Center Drive, Rm. 3150
University of Florida
Gainesville, FL 32610-0165

May 21, 2013

Dear Michael

I am pleased that your training grant "Physical, Cognitive and Mental Health in Social Context" strives to have a strong multidisciplinary focus, and that Nursing plays an important role in your program. I would be happy to serve as a consultant and member of your External Advisory Board.

I understand that the thematic focus of the program is multi-disciplinary research training in the study of the antecedents of functional independence and disability, with a particular focus on cognitive and mobility-related interventions for the promotion of independence.

I myself work in a rich multi-disciplinary environment, including collaborations with geriatric/medical and behavioral/social researchers. In addition to my primary appointment as Elouise Ross Eberly Professor in the School of Nursing, I also have a joint appointment in Psychiatry in our School of Medicine, and I have collaborated extensively with researchers in our Human Development and Family Studies program.

I believe Nursing is an ideal discipline for inclusion in your training program, which emphasizes the training of researchers who examine (a) antecedents of functional independence in the later years, and (b) potential interventions for the prevention of late life disability. Nursing is a discipline that is inherently focused on the whole person, and serves well to integrate research from biopsychosocial perspectives, and also to inform the design of interventions and the delivery of care.

I think I am uniquely qualified, among your advisory board, to speak to the complex care issues of persons in advanced old age. I am principally interested in dementia burden in the elderly, as well as the drug burden in nursing home residents with dementia. My own work has largely focused on the design of non-pharmacological behavioral interventions for delirium, and this will fit nicely with the intervention focus of some of your students.

I myself interact heavily with our doctoral students, and I am well poised to evaluate and advise on strategies to promote doctoral student productivity and placement success.

I understand that you will convene your board at least once a year, and we will review trainee progress, potential new recruits, faculty/student participation, as well as recommendations for improvement made by your faculty and student corps. I will be happy to participate, and to contribute to summary recommendations to improve your program and for inclusion in your annual progress report.

My own research deals largely with older adults after the onset of disability, so I cannot emphasize enough how important it is that we train a next generation of scholars who can better understand the predictors of, and potential interventions for prevention of, functional disability in later life.

Best of luck with your application,

Sincerely,



Ann M. Kolanowski, PhD, RN, FGSA, FAAN
Elouise Ross Eberly Professor in the School of Nursing
Director, [Hartford Center of Geriatric Nursing Excellence at Penn State](#).
Professor of Psychiatry, College of Medicine
Pennsylvania State University



Department of Mental Health

Bloomberg School of Public Health
624 N. Broadway / Baltimore, MD 21205-1999
(410) 955-3910 / FAX (410) 955-9088

May 23, 2013

Dr. Michael Marsiske
Department of Clinical and Health Psychology
University of Florida
PO Box 100165, 1225 Center Drive, Rm. 3150
University of Florida
Gainesville, FL 32610-0165

Dear Michael:

I will be delighted to serve as a consultant and member of your External Advisory Board for the NIA-funded predoctoral T32 training program on "Physical, Cognitive and Mental Health in Social Context." I understand that the thematic focus of the program is research training in the study of the antecedents of functional independence and disability, with a particular focus on cognitive and mobility-related interventions for the promotion of independence.

I understand that you are interested in my participation because of my expertise and experience with doctoral training in aging, my personal role as a psychologist (interested in cognitive aging) within a multidisciplinary research environment (i.e., a school of public health), and my understanding (based on my program of research) of the antecedents of, and some possible interventions for, the promotion of independence and the prevention of disability in older adults.

I think there are many strengths in your program as it has been described to me: (a) placement with a primary mentor who has a strong research profile in functional aging; (b) development of an annual mentorship contract that specifies quantifiable goals in the areas of research, education and service in aging; (c) assignment of a multidisciplinary mentoring team that reviews contract-related progress triannually; (d) pursuit of a Certificate in Gerontology (which emphasizes biopsychosocial aspects of aging); (e) attendance at a weekly colloquium in aging (focused largely around prevention of disability); (f) taking at least 11 credits of graduate methodology; and (g) regular engagement in discussions related to professional development and human subjects protections (which occur in addition to intensive didactic instruction in human subjects issues).

I understand that my role will be to annually review the program with you and other members of the board, and to provide summary recommendations that can shape the direction of the

next year's program, and will also be included in the grant annual progress reports. We will review your summary of trainee progress, including review of trainee self-evaluations, mentor evaluations, and faculty/student input into strengths and weaknesses of the program. We will also review your recommendations for newly recruited trainees. I look forward to playing this role.

Training next-generation scholars in the antecedents of, and intervention strategies to promote, functional independence in older adults could not be more important. As longevity increases, we must continue to develop effective strategies for the compression of morbidity.

I look forward to participating.

Sincerely,

A handwritten signature in dark ink, appearing to read "George W. Rebok". The signature is fluid and cursive, with the first name "George" and last name "Rebok" being the most prominent parts.

George W. Rebok, M.A., Ph.D.
Professor
Department of Mental Health
Bloomberg School of Public Health
The Johns Hopkins University
624 North Broadway
Baltimore, MD 21205-1901
Phone: 410-955-8550
Fax: 410-955-9088
E-mail: grebok@jhsph.edu

Diversity Recruitment Support Letters



MOREHOUSE
COLLEGE

DEPARTMENT OF PSYCHOLOGY

May 21, 2012

830 Westview Drive, S.W.
Atlanta, Georgia 30314-3773

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

TEL: (404) 215-2626
FAX: (404) 215-2754
www.morehouse.edu

Dear Dr. Marsiske,

I am writing this letter of enthusiastic support for your T-32 application on the physical, cognitive and mental health factors of aging in social context to assist with minority recruitment from Morehouse College in Atlanta, Georgia. As Professor and Chairperson of the Department of Psychology, I am dedicated to expanding the research training available to our students.

The College and Department have always placed an emphasis on preparing undergraduate students for graduate school and Ph.D. programs and your training program is a wonderful opportunity for advanced training in the cognitive factors of aging. There is a significant need for well-trained African American researchers and clinicians and this type of training program is an essential step to providing the necessary interdisciplinary training and experience. I strongly believe that your initiative to increase the number of underrepresented minorities in the training program will produce exceptional researchers who will have an impact on the field. I also believe that your training program will benefit by virtue of having a diverse cohort of students who possess unique experiences and skill sets.

I am happy to be a part of this exciting graduate research training opportunity for our students and I look forward to recommending outstanding students to your training program.

Sincerely,

Dr. Duane Jackson, Ph.D.
Professor and Chairperson
Department of Psychology
Morehouse College



Florida Agricultural and Mechanical University

Tallahassee, Florida 32307-3100

Excellence with Caring

DEPARTMENT OF PSYCHOLOGY

Telephone: (850) 599-3014
Fax: (850) 412-7667

May 16, 2012

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

Dear Dr. Marsiske,

I am writing this letter in enthusiastic support of your training program in the physical, cognitive and mental health factors of aging in social context and to confirm my willingness to serve as a referral source for exceptional pre-doctoral candidates from Florida A & M University. As Associate Professor and Chair of the Department of Psychology, I am extremely interested in increasing the graduate research training opportunities for our students, especially within the state of Florida. There is a significant need for these types of training programs in the Southeastern United States.

The Psychology Department at Florida A & M University is uniquely positioned to serve as a referral source for your training program. The psychology department's programs have grown out of the university's recognition of the need for more psychologically trained African American professionals and scientists to address the critical shortage in the areas of human services education and research. As a department, we have many extraordinary undergraduate and graduate students who would be an ideal fit with your training program.

I strongly believe that the training program would be strengthened by virtue of having a more diverse group of students and mentors who possess unique experiences and skill sets. This proposed partnership will increase the number of underrepresented minorities in your program and provide these students with first class training in the physical, cognitive and mental health factors of aging.

I wish you the best of luck with the review process and very much look forward to our future collaborations within the context of providing quality student candidates to your training program.

Sincerely,

Gwendolyn Singleton, Ph.D.
Associate Professor and Chair



CLARK ATLANTA UNIVERSITY
Department of Psychology

May 18, 2012

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

Dear Dr. Marsiske,

I am writing to express my strong support of your T-32 training grant application on the physical, cognitive and mental health factors of aging at the University of Florida College of Public Health and Health Professions. I am also very pleased to support your ongoing recruitment effort for top-notch minority candidates into the training program, including recruitment of prospective pre-doctoral trainees from Clark Atlanta University, a traditionally African American institution of higher learning. As Chair of the Department of Psychology, I believe I am in an excellent position to assist with this effort.

Despite the existence of several NIH-supported programs to increase the participation of under-represented groups in biomedical research, minority researchers continue to be under-represented in most fields of biomedical and behavioral research on aging. This under-representation limits the cultural and ethnic diversity of the research workforce as well as the important perspectives that comes with such diversity. Your goal to vastly increase the numbers of qualified minority researchers in your training program is an essential step to increase minority representation in all health science fields. Additionally, there are multiple linkages between our academic programs and there is little doubt that several of our students would be well suited for this proposed graduate training program.

I am very happy to be a part of this important initiative and I look forward to referring exceptional students to your training program. It will be a pleasure to work with you on this critically important effort to train future scientists in the field of aging.

Sincerely,

A handwritten signature in black ink that reads "Timothy O. Moore".

Timothy O. Moore, Ph.D.
Chair and Associate Professor



College of Education, Humanities and
Behavioral Sciences
Psychology/Counseling
P. O. Box 1657
Normal, Alabama 35762
(256) 372-4764 Office
(256) 372-5532 Fax

May 21, 2012

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

Dear Dr. Marsiske:

I am writing this letter in enthusiastic support of your training program in the physical, cognitive and mental health factors of aging in social context and to assist with minority recruitment from Alabama A & M University. As Professor and Director of Clinical Training in the Psychology and Counseling Department, I am always looking for advanced training opportunities for our students.

I am very familiar with the excellent reputation of many of the programs at the University of Florida and the emphasis on minority recruitment and retention makes this training grant application an ideal addition to the available graduate training opportunities. As the need for high-caliber minority researchers grows, one of the best ways to increase the presence of African American and other underrepresented researchers in biomedical and other health-related fields, such as rehabilitation sciences, audiology, communication sciences, and clinical and health psychology, is through active recruitment and partnerships with other institutions. To this end, your proposed partnership with Alabama A & M University will be highly effective in identifying outstanding minority undergraduate and graduate students for your training program.

As Director of Clinical Training, I am very aware of the need for additional clinical training opportunities in the Southeastern U.S. and I very much look forward to working with you to identify potential pre-doctoral fellows for this proposed training program.

Professionally,

A handwritten signature in cursive script that reads 'Annie M. Wells'.

Annie M. Wells, Ph.D.
Professor and Director of Clinical Training
Psychology and Counseling Department
Alabama A & M University

MICHIGAN STATE
U N I V E R S I T Y

May 22, 2012

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

Dear Dr. Marsiske,

I am writing this letter to indicate my support for your T-32 application on the physical, cognitive and mental health factors of aging in social context to assist with minority to recruitment into the training program. As Assistant Professor in the Department of Psychology at Michigan State University, I am very interested in finding exciting research opportunities for our students.



Zaje A. T. Harrell, Ph.D.
Assistant Professor

Department of
Psychology

Michigan State University
134B Psychology
East Lansing, Michigan
48824-1116

TEL: 517/432-1811
FAX: 517/432-2945
harrellz@msu.edu

There is a substantial need for well-trained African American researchers and clinicians and your training program is an ideal way to provide the necessary interdisciplinary training and education. I believe that your goal to increase the number of underrepresented minorities in the training program will produce excellent researchers who will have a marked impact on the field. I believe that your training program will also benefit by virtue of having a diverse cohort of students who possess unique experiences and skill sets.

Like the University of Florida, the Department of Psychology at Michigan State University has programs in health psychology, behavioral neuroscience, cognition and clinical neuroscience, and clinical psychology which truly match the foci of your training grant proposal. As such, our students are perfectly suited to excel in your proposed training program and would benefit greatly from this type of advanced training.

I wish you the very best of luck with the review of the training grant and I look forward to referring our students to your program in the future.

Sincerely,

A handwritten signature in black ink, appearing to read 'Zaje Harrell', is written over a horizontal line.

Zaje Harrell, Ph.D.



Department of Psychology

May 22, 2012

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

Dear Dr. Marsiske:

I am very pleased to write this letter of support to indicate my willingness to refer and recommend outstanding students from Morgan State University to your training program in the physical, cognitive and mental health factors of aging in social context. As the former Program Director of the Minority Mental Health Research Scholars Program that was funded by the National Institute of Mental Health-Career Opportunities in Research (NIMH-COR) Education and Training grant (T34), and current Minority Access to Research Careers (MARC) mentor, I am extremely committed to increasing the graduate research training opportunities for our students. Thus, many of my undergraduate trainees have already earned their Ph.D. in respective fields.

As a MARC mentor, I am committed to increasing the number of highly trained underrepresented biomedical and behavioral scientists in leadership and research positions. The MARC program provides essential support for minority undergraduate students to improve their preparation for advanced graduate training at the Ph.D. level, in programs like your proposed training grant. Your initiative to increase the number of underrepresented minority students in your training program is a key step to the development and training of the next wave of African American researchers. At Morgan State University and, specifically, in the Department of Psychology, we have many extraordinary undergraduate and graduate students who would be excellent additions to your training program.

I believe that the training program will benefit greatly by virtue of having a diverse group of students who bring unique perspectives and skills to the program. I am always looking for training opportunities for my students and I am happy to refer high caliber students to the proposed training program in the cognitive factors of aging.

Sincerely,

Dr. Terra Bowen-Reid, Ph.D.
Associate Professor



VIRGINIA STATE UNIVERSITY

VIRGINIA 23806

Vernessa R. Clark
Department of Psychology
1 Hayden Drive, Box 9079
Virginia, 23806

(804)524-5940 (o)
(804)524-5460 (f)

vrclark@vsu.edu

May 22, 2012

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

Dear Dr. Marsiske,

It is with great pleasure that I write this letter of support for your proposal to recruit more African American students into the University of Florida Training Program in the physical, cognitive and mental health factors of aging in social context. As an Associate Professor in the Department of Psychology at Virginia State University, I am interested in expanding the research opportunities available to our students. Many of our faculty and students have interests in diverse health issues.

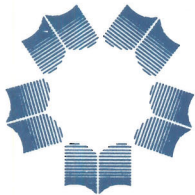
As the need for well trained African American researchers continues, one avenue to increase the presence of African American researchers in public health and other health-related fields, such as gerontology, is through active recruitment. To this end, your possible partnership with Virginia State University will be very helpful with your proposed project.

I strongly believe the proposed partnership would provide African American students interested in pursuing a doctorate in clinical psychology with advanced training in the cognitive factors of aging with the opportunity to receive first class training. In addition, the program would be strengthened by virtue of having a more diverse group of students and mentors who possess unique experiences and skill sets.

In closing, I am excited to be a part of this unique opportunity. I look forward to working with you.

Sincerely,

Vernessa Clark, Ph.D.
Associate Professor and Coordinator
General Psychology Program



PRINCE GEORGE'S
COMMUNITY COLLEGE

301 LARGO ROAD
LARGO, MD 20774-2199
301-336-6000



*Legacy
of Excellence
Lifetime
of Learning*

May 11, 2012

Dr. Michael Marsiske
College of Public Health and Health Professions
University of Florida
1225 Center Drive
Gainesville, FL 32611

Dear Dr. Marsiske,

I am pleased to offer my enthusiastic support for your T-32 application on Physical, Cognitive and Mental Health in Social Context training program on aging to assist with minority recruitment into the program. As Associate Professor in the Department of Psychology at Prince George's Community College, I am excited to expand the research opportunities available to our students.

I have had a long standing collaborative relationship with Dr. William Latimer, the new Chair of the Department of Clinical and Health Psychology that dates back over six years. I have had the opportunity to refer numerous students to Dr. Latimer including through the Summer Research with NIDA minority internship program. Many of these community college students went on to complete their undergraduate and graduate degrees in psychology. Additionally, several students who began as NIDA summer interns went on to work with Dr. Latimer's research team before continuing their education at four year colleges and graduate degree programs. Now that Dr. Latimer is Chair of the Department, I am happy to help with minority recruitment for this exciting T-32 training program in the physical, cognitive and mental health of aging.

There is a significant need to expand training opportunities for exceptional minority researchers and this training program is an ideal opportunity for such advanced training. The proposed T-32 is highly innovative with the particular focus on studies of modifiable risk factors associated with functional independence and prevention of disability in elderly adults. I am excited to support this unique opportunity for our students and look forward to collaborating with you.

Sincerely,

Sonia R. Bell, M.S.Ed.
Associate Professor
Department of Psychology
Prince George's Community College

Not applicable

PHS 398 Checklist

1. Application Type:

From SF 424 (R&R) Cover Page. The responses provided on the R&R cover page are repeated here for your reference, as you answer the questions that are specific to the PHS398.

* Type of Application:

☐ New ☒ Resubmission ☐ Renewal ☐ Continuation ☐ Revision

Federal Identifier:

2. Change of Investigator / Change of Institution Questions

☐ Change of principal investigator / program director

Name of former principal investigator / program director:

Prefix:

* First Name:

Middle Name:

* Last Name:

Suffix:

☐ Change of Grantee Institution

* Name of former institution:

3. Inventions and Patents (For renewal applications only)

* Inventions and Patents: Yes ☐ No ☐

If the answer is "Yes" then please answer the following:

* Previously Reported: Yes ☐ No ☐

4. * Program Income

Is program income anticipated during the periods for which the grant support is requested?

☐ Yes ☒ No

If you checked "yes" above (indicating that program income is anticipated), then use the format below to reflect the amount and source(s). Otherwise, leave this section blank.

*Budget Period *Anticipated Amount (\$)

*Source(s)

5. * Disclosure Permission Statement

If this application does not result in an award, is the Government permitted to disclose the title of your proposed project, and the name, address, telephone number and e-mail address of the official signing for the applicant organization, to organizations that may be interested in contacting you for further information (e.g., possible collaborations, investment)?

☒ Yes ☐ No

PHS 398 Cover Letter

* Mandatory Cover Letter Filename:

Attachments

CoverLetterFilename_attDataGroup0

File Name

coverletter1003165903.pdf

Mime Type

application/pdf

Appendices

Appendix A. Supplemental course information: Gerontology Certificate; Sample Programs of Study

As detailed in the body of the proposal, students must complete the Gerontology Certificate. They must choose at least three of the following courses; some customization is also possible, as noted

- If a course is cross-listed at the graduate and undergraduate level, graduate students must enroll at the graduate level. If the course is a seminar or special topics class, the course is approved only when the course title matches the one listed below
- These courses are not offered every semester. Check with departments or instructors to find out when courses will be offered before planning your course of study.

M = Enrollment in these courses is generally restricted to majors and gerontology credit is given only to majors in this department.

Gerontology and Geriatric Care Management

***GEY 6646** Issues and Concepts in Gerontology (*web-based, core required course*)

RCS 6931 Medical and Health Management Issues in Aging (web-based)

GMS 6181 Integrative Aging Physiology

Anthropology

ANG5464 Culture and Aging

Clinical and Health Psychology

CLP7934 Special Topics: Psychotherapy with Older Adults;

CLP 7934 Very Late Life;

CLP 7934 Neuropsychology of Aging

Communication Sciences & Disorders

SPA6564 Communication and Aging M

SPA6345 Seminar in Audiology: *Hearing Aids M

Dentistry

DEN7319 Principles of Geriatric Oral Medicine

Education-Counselor Education

SDS6936 Death & Dying

Exercise and Sports Sciences

PET 7077 Aging and Free Radical Biology

Family, Youth, & Community Sciences

FYC 6932 International Perspectives on Aging and Caregiving

FYC 6932 Aging in the Context of Family and Community

Health Science Education

HSC6567 Health Promotion and Programming in Gerontology

HSC6935 Health and End-of-Life Issues

Health Services Administration

HSA6407 Health and Disease

Law

LAW6930 Health Care Law M

LAW6930 Estates and Trusts M

Nursing

NGR6252 Primary Care of Older Adults

RCS6931 Health Promotion, Disease Prevention and the Older Adult

NGR6930 Aging and Health Care issues

Medicine

GMS7593 Neurobiology of Aging (2 credits)

GMS6063 Mechanisms of Aging

Occupational Therapy

OTH6933 Special Topics: Elders

Physical Therapy

PHT6935 Seminar: Physical Aspects of Aging

Psychology

DEP6059 Special Topics: *Memory Across the Life Span; *Cognition Across the Life Span *Social Cognition and Aging; *Autobiographical Memory and Aging

DEP 6406 Adult Development and Aging

EXP 6939 Current Issues in Cognition and Sensory Processes: *Language, Cognition and Aging; *Theories of Cognitive Aging

PSB 4934 Aging and the Brain (Undergraduate listing)

Public Health

PHC 6717 Disability Research

PHC 6937/PHC 6003 Chronic Disease

PHC 6405 Epidemiology of Aging

Sociology

SYP6735 Sociology of Aging and the Life Course

SYP6736 Sociology of the Aged

SYP6745 Aging and End-of-Life Issues

SYA7933 Special Study: *Retirement Research

SYA7933 Special Study: *Health and Aging

SYA 7933 Special Study: Gender and Aging

SYA 7933 Special Study: Health Disparities and the Life Course

Students or faculty can apply to have a new course added to the approved list if the course content is substantially related to aging issues. A request verifying that the course has significant aging-related content.

Sample program of study for two core disciplines

Ph.D. Rehabilitation Science Recommended Course Sequence

Year I (27)

Fall (10)

(3) RSD 6110 Rehab Science
(3) RSD 6930 College Teaching
(4) RSD 6705 Methods/Statistics
(3) Concentration Area Courses

Spring (11)

(1) RSD 6930 PhD Seminar
(3) RSD 6940 Supervised Teaching
(4) RSD XXXX Methods/Stats II
Apply for admission to T32 program

Summer (6)

(6) Concentration Area Courses

Year II (24)

Fall (9)

(3) Elective
(3) Concentration Area Courses
(3) RSD 6905/7979 Research
Begin doctoral qualifying exams
Take first aging elective

Spring (9)

(2) AGG 6830 Grant Writing
(3) Concentration Area Course
(4) RSD 6905/7979 Research
Apply for T32 funding
Defend qualifying exam

Summer (6)

(6) Concentration Area

Develop dissertation proposal

Year III (24)

Fall (9)

(3) Electives
(6) RSD 6905/7979 Research
Begin T32 program
Defend dissertation proposal
Begin dissertation

Spring (9)

(3) Electives
(6) RSD 6905/7979 Research
Take second aging elective

Summer (6)

(3) Electives
(3) RSD 6905/7979 Research
Take third aging elective

Year IV (17)

Fall (9)

(3) Electives
(6) RSD 7980 Dissertation
Take final aging elective

Spring (9)

(8) RSD 7980 Dissertation
Complete & Defend dissertation

Note: *Items in italics represent the integration of T32 program requirements. It is further expected that students will meet with their primary mentors weekly, and with their mentoring teams at least once a semester. Aging colloquium meets weekly in Fall and Spring semesters. Students may also need to take additional statistics/methods courses if they do not meet the 12-credit minimum through their departmental requirements.*

Ph.D. Clinical & Health Psychology
Recommended Course Sequence

Year	Fall	Spring	Summer
1 29 cr.	Research Design (4) Child Psychopathology (3) Adult Psychopathology (3) Intro to Clin Psychology (1) Master's Research (1) 12	Research Design (4) Child Assessment (3) Adult Assessment (3) Master's Research (1) <i>Apply for admission to training program</i> 11	Intro Psych Intervention (3) Master's Research (1) Core Practicum (2) (prepract Summer A, core rotations begin Summer B) 6
2 26 cr.	Cognitive Bases of Beh (3) Behavioral Health/Illness (3) Core Practicum (2) Master's Research (1) Present First Year Project 9	Multivariate Statistics or Higher Cortical Function (3) Foundations Proseminar* (3)* Core Practicum (2) Master's Research (3) Defend MS <i>Apply for T32 funding</i> 11	Elective (3) Advanced Research (1) Core Practicum (2) (rotations end at the end of Summer A) Form Doctoral Committee <i>Take first aging elective</i> 6
3 26 cr.	Advanced/Doctoral Res (2) Developmental Bases (3) Electives (6) Take Qualifying Exam <i>Take second aging elective</i> 11	Multivariate Statistics or Higher Cortical Function (3) Elective (3) <i>or</i> Foundations Proseminar* (3) Advanced Tx Practicum (1) Doctoral Research (2) <i>Take third aging elective</i> 9	Doctoral Research (2) Elective (3) Advanced Tx Practicum (1) Propose Dissertation <i>Take final aging elective</i> 6
4 18 cr.	Elective (3) Doctoral Research (2) Advanced Tx Practicum (1) Apply for Internship* 6	Elective (3) <i>or</i> Foundations Proseminar* (3) Doctoral Research (2) Advanced Tx Practicum (1) 6	Elective (3) Doctoral Research (2) Advanced Tx Practicum (1) 6
5 8 cr.	Internship (2) Doctoral Research (1) 3	Internship (2) Doctoral Research (1) 3	Internship (2) 2

*Foundations Proseminars are administered in Psychology and include Social and History; can be taken in any order; offered only in Spring. Other two foundations courses taught by CHP.

The 2-credit "primary care" rotation is not separately depicted above, but is designed to be taken during one of the three semesters of the third year.

Overall curriculum is 109 credits (including the PC rotation). Three electives available in Fall, one in Spring, three in Summer (7 total); subject to change. Program requires electives in advanced intervention and a general "breadth" course. There is also an advanced statistics elective, typically addressed by Multivariate Statistics. Area of Concentration requires 12-15 credits (4-5 electives) including coursework and practicum requirements.

Note: Items in italics represent the integration of T32 program requirements. It is further expected that students will meet with their primary mentors weekly, and with their mentoring teams at least once a semester. Aging colloquium meets weekly in Fall and Spring semesters. Students may also need to take additional statistics/methods courses if they do not meet the 12-credit minimum through their departmental requirements.

Appendix B. Colloquia and roundtables

Weekly colloquia from the last five years, and representative roundtables from the previous year are shown here:

Colloquia

Date	Speaker	Title
18-Nov-13	Jane Kent-Braun, Ph.D., University of Massachusetts-Amherst	Jane A. Kent-Braun, Ph.D., University of Massachusetts-Amherst. TBA topic
28-Oct-13	Frank R. Lin, M.D., Ph.D., Johns Hopkins University	Frank R. Lin, M.D., Ph.D., Johns Hopkins University. TBA topic
9-Sep-13	Barbara Lutz, Ph.D., R.N., C.R.R.N., F.A.H.A., University of Florida	Barbara Lutz, Ph.D., R.N., C.R.R.N., F.A.H.A., University of Florida, Ph.D., R.N., C.R.R.N., F.A.H.A., University of Florida. TBA topic
20-May-13	Betty Lackey, M.D., and Salvador Ramos-Camacho, M.D., Geriatric Fellows, University of Florida and NF/SGVHS-GRECC	Interesting clinical cases in geriatrics
13-May-13	Joseph L. Riley III, Ph.D., University of Florida	Age differences in models of pain modulation
6-May-13	Michael Marsiske, Ph.D., University of Florida	Cognitive enhancement in older adults
29-Apr-13	Rebecca Butcher, PhD, University of Florida	Small-molecule signals that control development, metabolism, and aging in <i>C. Elegans</i>
22-Apr-13	Sylvain Dore, PhD, University of Florida	Research for novel/effective stroke therapies
15-Apr-13	Hyochol "Brian" Ahn, PhD, ARNP, ANP-BC, University of Florida	Pain and disruptive behaviors in nursing home residents with dementia
1-Apr-13	Frederick A. Moore, M.D., University of Florida	Sepsis induced PICS: a looming epidemic in the elderly
25-Mar-13	Nishanth E. Sunny, Ph.D., University of Florida	Remodeling of hepatic metabolism during obesity and insulin resistance
18-Mar-13	Helen Vlassara, M.D., Mt Sinai School of Medicine, NY	CANCELLED: AGEs in Chronic Diseases of Aging and a Paradigm Shift
25-Feb-13	Natalie Ebner, Ph.D., University of Florida	CANCELLED: Processing of Socioemotional Information in Aging: A Neuro-Behavioral Analysis
11-Feb-13	Heather Allore, Ph.D., Yale University	Designing multicomponent interventions for older persons with multifactorial geriatric syndromes
14-Jan-13	Wendy Kohrt, Ph.D., University of Colorado	Metabolic and bioenergetic consequences of the loss of gonadal function
7-Jan-13	Richard W. Briggs, Ph.D., University of Texas Southwestern Medical Center	Multi-modal MR (fMRI, MRS, ASL) Studies of Gulf War Illness
10-Dec-12	Michael Drey, M.D., Friedrich Alexander University of Erlangen, Nurnberg	Neurodegeneration in the Onset of Sarcopenia
3-Dec-12	James S. Goodwin, M.D., University of Texas	Comparative effectiveness of nurse practitioners and physicians in primary care of the elderly
5-Nov-12	Kevin High, M.D., Wake Forest University, Winston Salem, NC	Developing a Nonhuman Primate Model of Aging, Inflammation and Physical Decline.
29-Oct-12	Richard Deason, MS, and Christopher Harle, PhD, UF&Shands Academic Health Center	UF&Shands Academic Health Center Integrated Data Repository – 2012 Update on i2b2 for Cohort Discovery

Date	Speaker	Title
15-Oct-12	Michael Boulton, PhD, University of Florida	β -Secretase and γ -Secretase Inhibition Cause Retinal Pathology: A Cautionary Tale in the Treatment of Alzheimer's Disease
1-Oct-12	Eric Krause, Ph.D., University of Florida	Angiotensin multitasking in the brain: eating, drinking, and stress responding
24-Sep-12	Michael Ristow, M.D., University of Jena, Germany	Promotion of Metabolic Health and Lifespan by Transiently Increasing Oxidative Stress
17-Sep-12	Nichole Campbell, Ph.D., University of Florida	How Buildings Impact Health, Wellbeing and Behavior
10-Sep-12	David J. Clark, ScD, University of Florida	Neural Control of Walking and Implications of Neurological Impairments
27-Aug-12	Brad J. Behnke, PhD, University of Florida	Oxygen Exchange with Aging and Exercise Training: Differential effects on muscle, adipose tissue, and reproductive organs
21-May-12	Faiza Aziz, M.D., Anubha Gupta, MD, and Muhammad Izhar, MD, University of Florida and NF/SGVHS-GRECC	Interesting Clinical Cases in Aging and Geriatrics
30-Apr-12	Richard Schofield, MD, FACC, University of Florida	Heart Failure in the Elderly
30-Jan-12	Judy Muller Delp, PhD, University of Florida	An Essential Role for Oxidants in the Aging Microcirculation
23-Jan-12	William W. Hauswirth, PhD, University of Florida	Gene Therapy Clinical Trial for LCA2, a Genetic Form of Blindness
12-Dec-11	Leanne Redman, PhD, Pennington Biomedical Research Center	Importance of dietary protein on body composition, energy expenditure and insulin sensitivity during overfeeding
28-Nov-11	Brian C. Clark, PhD, Ohio University	Sarcopenia _ Dynapenia
14-Nov-11	Nathan LeBrasseur, PT, PhD, Mayo Clinic, Rochester MN	Combating Sarcopenia and the Penalties of Aging
31-Oct-11	Colleen Ebel, MBA, Gigi Lipori, MBA, Christopher Harle, PhD, and Richard Deason, MS, University of Florida	UF&Shands Academic Health Center Integrated Data Repository
24-Oct-11	Edward Lesnefsky, MD, McGuire VAMC, Richmond, VA	Reperfusion of Acute Myocardial Infarction in the Elderly: Mitochondria Become a Menace
17-Oct-11	Russell Richardson, PhD, VAMC, Salt Lake City, Utah	Antioxidants, aging, and exercise: Is there a paradox?
3-Oct-11	Todd Manini, PhD and Mark Wallet, PhD, University of Florida	HIV and Aging: Effects on muscle function and inflammation
26-Sep-11	Gregory Schultz, PhD, University of Florida	Effects of Aging on Healing _ Applications to Anti-Scarring and Anti-Wrinkling
19-Sep-11	David Sinclair, PhD, Harvard Medical School	Genes and small molecules to slow the pace of aging
12-Sep-11	Frank Bova, PhD, University of Florida	Image guidance, tools and procedures
29-Aug-11	Peter Stacpoole, MD, PhD, University of Florida	The Pyruvate Dehydrogenase Complex Relationship to Aging is Definitely Complex!
23-May-11	Marc Blackman, M.D., Washington DC, VAMC	Intervention Studies with GH or GH Secretagogues Healthspan
16-May-11	Andrey Ptitsyn, PhD, University of Florida	From Computational Analysis to Personalized Medicine in Metabolic Syndrome
9-May-11	Russell Hepple, PhD, University of Calgary, Canada	Current Perspectives on Age-related Muscle Atrophy
2-May-11	Yohannes Endeshaw, MD, MPH, University of Florida	Sleep Disordered Breathing, Similarities and Differences between Younger and Older Adults

Date	Speaker	Title
25-Apr-11	Le Prell, Colleen, PhD, University of Florida	Development of Therapeutics to Protect the Inner Ear: From Animal Models to Human Trials
18-Apr-11	Roger Filligim, PhD&, University of Florida	Contributions of Age, Gender and Ethnicity to Individual Differences in Pain
14-Apr-11	Andrei Seluanov, PhD, University of Rochester, New York	Anticancer mechanisms in a long-lived, cancer-resistant rodent, the naked mole rat
11-Apr-11	Evangelos Christou, PhD University of Florida	Aging and Learning to Control Fine Novel Motor Tasks
4-Apr-11	Russell Bauer, PhD, University of Florida	A Comparative Neuropsychology Approach to Preclinical Dementia
28-Mar-11	Zvinka Zlata, PhD, University of Florida	Functional Language Networks in Sedentary and Physically Active Older Adults
16-Mar-11	Vera Gorbunova, PhD, University of Rochester, New York	DNA Repair and Aging
14-Mar-11	Sreekumaran Nair, MD, PhD Mayo Clinic Rochester, MN	Slow Down Aging?
14-Feb-11	David Clark, ScD University of Florida	Neural Contributions To Weakness and Walking Deficits
31-Jan-11	Stanley Hazen, M.D., PhD Cleveland Clinic	Gut Flora Metabolism of Dietary Lipid and the Pathogenesis of Artherosclerotic Heart Disease
24-Jan-11	Thomas Foster, PhD University of Florida	Alpha Beta to Ying Yang: The Role of Different Estrogen Receptors in the Etiology of Age-Related Cognitive Decline
13-Dec-10	William Mann, PhD, OTR University of Florida	The Florida Institute on Disability and Rehabilitation
29-Nov-10	Henrietta Logan, PhD University of Florida	Chronic Disease Patterns Among Rural North Florida Residents
22-Nov-10	Benjamin Predmore, PhD Emory University	Hydrogen Sulfide, Implications for Cardiac Function, Future Clinical Care and Aging
15-Nov-10	Kevin Vincent, M.D., PhD University of Florida	Are Today's Runners Tomorrow's Cyclists: Does Running Cause Knee Osteoarthritis and How to Conservatively Manage Knee Pain
8-Nov-10	Sandra Winkler, PhD, OTR/L	Assistive Technology Research
1-Nov-10	Anna Maria Cuervo, M.D., PhD Yeshiva University, Bronx, New York	Selective Autophagy in Aging and Age Related Disorders
25-Oct-10	Michael Boulton, PhD University of Florida	Age Related Macular Degeneration: Pathogenesis and Treatment
18-Oct-10	Carolynn Patten, PhD, PT University of Florida	Retraining Gait Post Stroke-We're Not Doing What We Think We Are Doing!
27-Sep-10	Zhen Yan, PhD University of Virginia	Exercise-Induced Addition and Removal of Mitochondria in Skeletal Muscle
20-Sep-10	Stephan Praet, PhD, Erasmus Medical Centre The Netherlands; Dual Presentation	New Insights and Ideas from Elite Sports to Boost the Metabolic Control of Your Type 2 Diabetes Patients
20-Sep-10	Luc van Loon, PhD, Maastricht University Medical Centre, The Netherlands; Dual Presentation	The Role of Satellite Cells in Muscle Remodelling
13-Sep-10	Kristin Wing and Jini Hanjian, Gainesville VA	Implementing a Promotional Campaign for a Stroke Caregiving Web Site
30-Aug-10	Todd Golde, M.D., PhD University of Florida	Alzheimer's Aging, and the Senescence Response
24-May-10	Sherilene Classen, PhD, MPH, OTR/L	The Safe Driving Behaviors Measure: A Self-

Date	Speaker	Title
	University of Florida	Report for Older Drivers and Their Caregivers
17-May-10	Stephen Borst, PhD University of Florida	Bone Concentration and Metabolism of Sex Steroid Hormones
10-May-10	Amy Dailey, PhD, MPH University of Florida	Using Mixed-Methods Research to Elucidate the Underlying Mechanisms That Link Neighborhoods to Health
3-May-10	Andrew Judge, Phd University of Florida	Age related muscle regrowth from inactivity-induced atrophy
26-Apr-10	Henrietta Logan, PhD University of Florida	Engaging the Community in Early Detection and Prevention Practices: Theoretically Grounded Translational Research
19-Apr-10	Ronald Shorr, M.D., M.S. University of Florida	Preventing falls in hospitals: Where aging and patient safety go down
5-Apr-10	Joe Nocera, PhD, University of Florida	Functional Movement and Rehabilitation Strategies in Parkinson's Disease
29-Mar-10	Fred Wolinsky, PhD, MA, University of Iowa	Racial Consciousness and School Segregation in the African American Health Cohort: Enduring Effects on the Sense of Control...
1-Mar-10	Brain Harfe, PhD, University of Florida	The Notochord: Back pain, stem cells and cancer
22-Feb-10	LaDora Thompson, PhD, University of Minnesota	Muscle Aging: The role of dysfunctional proteins
8-Feb-10	Christy Carter, PhD, University of Florida	Role of the Renin-Angiotensin System in Aging Skeletal Muscle
1-Feb-10	Michael Forster, Ph.D., University of North Texas	Is brain aging preventable?
25-Jan-10	Steven Smith, M.D., Florida Hospital	Skeletal muscle mitochondria, guilty or innocent bystander
11-Jan-10	Brian Irving, PhD, University of Rochester, MN	Impact of Exercise on Skeletal Muscle Metabolism and Protein Synthesis in Aging Adults
4-Jan-10	Douglas Miller, M.D., Indiana University	Disability disparity and contextual effects on health
14-Dec-09	Keith MCgregor, PhD	Effects of Aerobic Fitness on Neural Correlates of Aging: A TMS/fMRI Investigation
7-Dec-09	Leanne Redman, PhD, Pennington Biomedical Research Center	Calorie Restriction for Longevity: Is it feasible? Lessons learned from humans
30-Nov-09	Steve Anton, Ph.D., University of Florida	Biological Effects of Weight Loss and Exercise in Elders
16-Nov-09	Bridgett Rahim-Williams, PhD UF	Pain and Negative Affect Among African Americans, Latinos, and non Latino Whites with Arthritis
2-Nov-09	Holly VanRemmen, PhD University of Texas	Impact of Oxidative Stress and Mitochondrial Dysfunction on the Neuromuscular Junction and Age-Related Atrophy
26-Oct-09	Dorette Ellis, PhD, University of Florida	Nitric Oxide Regulation in Physiological and Physiological States
19-Oct-09	Priyamvada Rai, Ph.D University of Miami	Understanding the Dual roles of Oxidative Stress in Tumor Suppression and Tumor Progression
5-Oct-09	Joshua Yarrow, Phd, CSCS UF	Pharmacological Strategies to Prevent Bone and Muscle Loss

Date	Speaker	Title
28-Sep-09	Otto Sanchez, M.D., PhD, Vanderbilt University	Microvascular Function in skeletal muscles: methods and applications for the elderly
21-Sep-09	Kevin Yaraskeski, PhD Washington University	HIV and cardiovascular disease; Is it in the HAART or HEART?
14-Sep-09	Christy Carter, Ph.D., University of Florida	Role of the Renin-Angiotensin System in Aging Skeletal Muscle
31-Aug-09	Marcus Meinzer, PhD, University of Florida	Harold Que Pasa, and Language Functions in Aging
18-May-09	Amy Dailey, Ph.D., University of Florida	Perceived Racial Discrimination and Cardiovascular Disease
11-May-09	Robert Cousins, Ph.D., University of Florida	Zinc, IL-6 and Aging – A Hypothesis
4-May-09	Lisa Langoria, BA, MS/CCC-SLP UF _ PHHP	Vocal Exercise with Adjunctive Electrical Stimulation: A Case Series
27-Apr-09	Miho Bautista, MD UF Aging/ VA GRECC	Health Literacy Predicts Utilization of Total Knee Arthroplasty in Older Adults with Knee Pain
13-Apr-09	Martin Rhee, MD Tufts Medical Center, Boston	HIV Infection and Aging
6-Apr-09	Martin Heesacker, Ph.D., University of Florida	Informal Care given to Veterans with Stroke
30-Mar-09	Fredric Wolinsky, Ph.D., University of Iowa	Continuity of Care and Mortality Among Older Adults
23-Mar-09	Connie Uphold, Ph.D., University of Florida / VA GRECC	Implementation Science Study to Investigate Outcomes in Patients with Atrial Fibrillation
2-Mar-09	Meredith Rowe, Ph.D., University of Florida	Preventing Falls, Preserving Home Placement for Persons with Dementia
23-Feb-09	Lewis Radonovich, MD VA / UF Medicine	The VA Center for Occupational Safety and Infection Control: Purpose and Collaborative Opportunities
9-Feb-09	Kevin Conley, PhD Univ of Washington	Mitochondrial Dysfunction in Age and Disease
2-Feb-09	Barbara Lutz, PhD, RN UF _ College of Nursing	Meeting the needs of stroke survivors and their family caregivers as they transition home from inpatient rehab
26-Jan-09	Michelle Lee, MD (Clinical Asst Prof interview)	Quality Improvement Education Using Anticoagulation Management as a Model
12-Jan-09	Thomas Buford, Ph.D., Baylor University	Exercise and Nutrition: From Bench Press to Bench Top
15-Dec-08	Todd Manini, Ph.D., University of Florida	OAIC Pepper Scholar Updates
8-Dec-08	Lodovico Balducci, MD Moffitt Cancer Center	Geriatric Oncology: A Bridge
3-Nov-08	Aging Poster Day, HPNP Co-sponsoring with ILR	Institute for Learning in Retirement
20-Oct-08	Shalender Bhasin, M.D., Boston University	Current Controversies in Testosterone Replacement of Older Men
6-Oct-08	Neil Shay, PhD, University of Florida	Evaluating Dietary Supplement Use to Improve Metabolism in Older People
22-Sep-08	Andrew Judge, Ph.D., University of Florida	Heat Shock Proteins As Signaling Molecules in Skeletal Muscle During Disuse and Aging
8-Sep-08	Steve Anton, Ph.D., University of Florida	Modulation of Metabolic Disease and Aging Processes by Caloric Restriction and Exercise

Roundtables (sample from previous year)

Date ▼	Speaker	Title	Location
6/16/2011	Dr. Michael Daniels, Chair, Statistics	Analysis and Statistics	DG-22A
7/21/2011	Dr. Margarete Dasilva	Group feedback: Grant proposal in progress	DG-22A
8/18/2011	Dr. Margarete Dasilva	The grant writer's handbook	DG-22A
10/20/2011	Dr. Steven Anton	Proposing a weight loss plus exercise study: Discuss of logistics and human subjects issues	DG-22A
1/19/2012	Various	Open review of proposals in progress	DG-22A

Appendix C. Program forms

1.Application Form

1. Complete this form, and send me an email when you have done so.

2. Have your mentor complete this form, and ask them to email me when they have done so

https://spreadsheets.google.com/spreadsheet/viewform?key=0AlerF1FnL-hmcC03UE1zNkF4YWxTdXVZSkNwVzVzZVE&hl=en_US#gid=0

3. At the bottom of the mentor form above, from your mentor, we need a list of the externally funded grants that they are currently PI of for the past 5 years, as well as which PI'd grants they have under review. It is okay if they also list grants on which they are co-investigator, etc., but the review committee is SPECIFICALLY interested in their record of recently PI'd grants. For these grants, standard information (Title, PI, run dates, funding agency, agency grant number, person months, brief one-sentence summary) that would appear on an NIH biosketch is sufficient. There is no deadline, but your materials will be reviewed immediately upon receipt, and decisions will be made fairly quickly.

* Required

Lastname *

Firstname *

Email address *

Mentor's name *

Department Name *

How did you hear about this traineeship? Newsletter/journal? *

- ☐ Yes
- ☐ No

How did you hear about this traineeship? Listserv/website? *

- ☐ Yes
- ☐ No

How did you hear about this traineeship? Colleague/advisor? *

- ☐ Yes
- ☐ No

If you heard about this traineeship by some other means, type it in below:

UFID *

Best daytime phone#: *

Citizen or permanent resident? Only those who answer "yes" may apply for this fellowship. *

- ☐ Yes
- ☐ No

The next set of questions ask about what post-secondary academic institutions you have attended. For each institution complete four fields (University Name, Dates Attended, Major, and Degree received). You may enter up to five institutions. If you attended fewer than five institutions, leave the remaining fields blank.

University1

Dates (from-to)1

Major1

Degree1

University2

Dates (from-to)2

Major2

Degree2

University3

Dates (from-to)3

Major3

Degree3

University4

Dates (from-to)4

Major4

Degree4 University5 

Dates (from-to)5

Major5 Degree5 Undergraduate GPA *

Masters GPA (if you completed your Masters at a different institution, or prior to matriculating in your current Ph.D. program. Otherwise, leave blank)

Masters title (if you have completed a Masters Thesis or equivalent)



UF Graduate GPA to date *

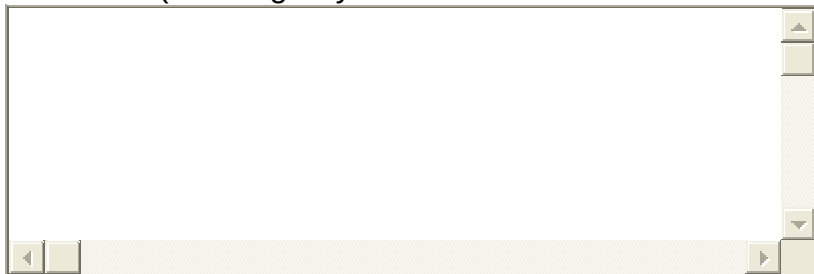
List titles of all aging courses taken to date (any institution, any level); separate each with a semicolon. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory)



List titles of all GRADUATE statistics/methods taken to date; separate each with a semicolon.
(Warning: Try to limit this list to 250 words or less to avoid exceeding system memory)



List names of all honors/awards, scholarships/traineeships received to date; separate each with a semicolon. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory)



GRE-V score *

GRE-Q score *

GRE-A/written *

TOEFL if applicable

Enter your number of first authored journal articles (published or in press)

Enter your number of all other not-first authored journal articles (published or in press)

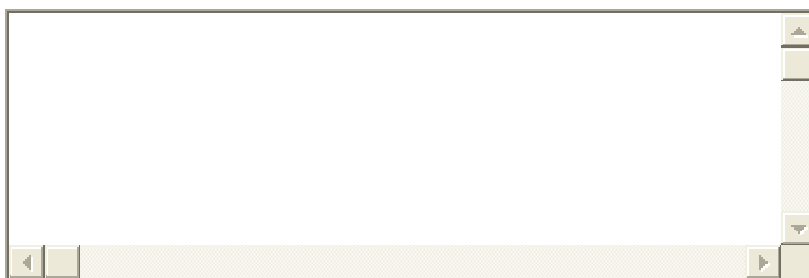
Enter your number of first authored chapters (published or in press)

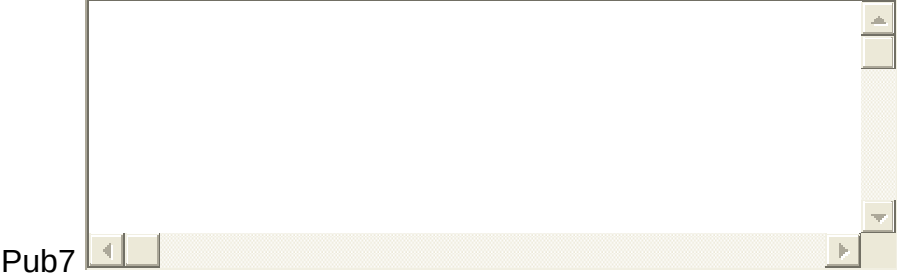
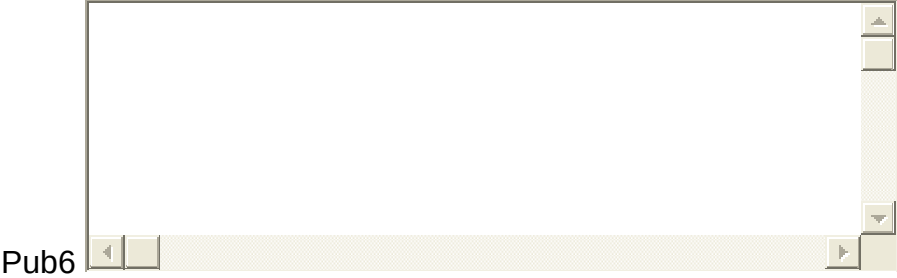
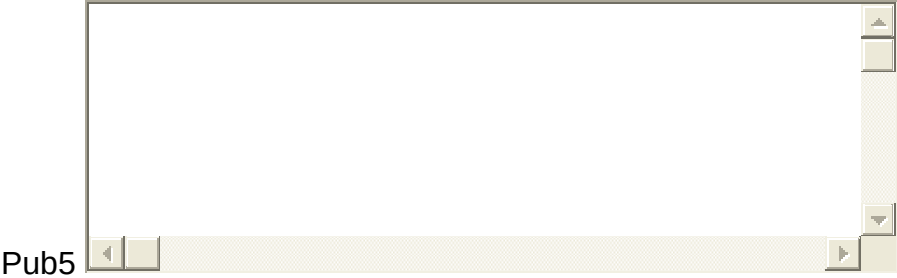
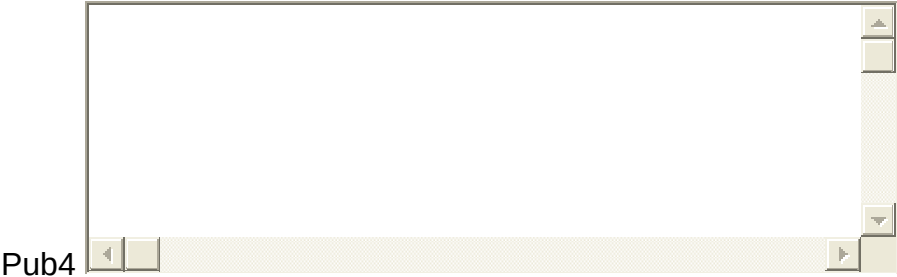
Enter your number of all other not-first authored chapters (published or in press)

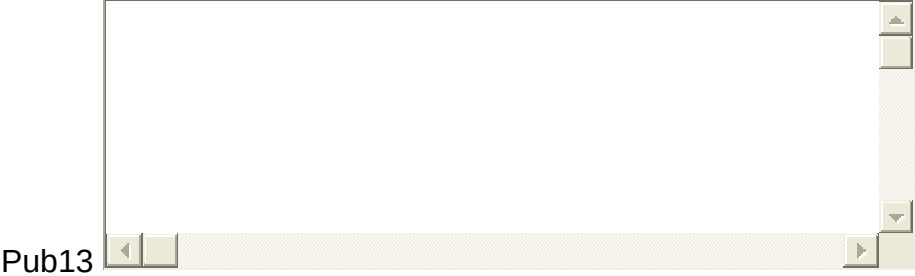
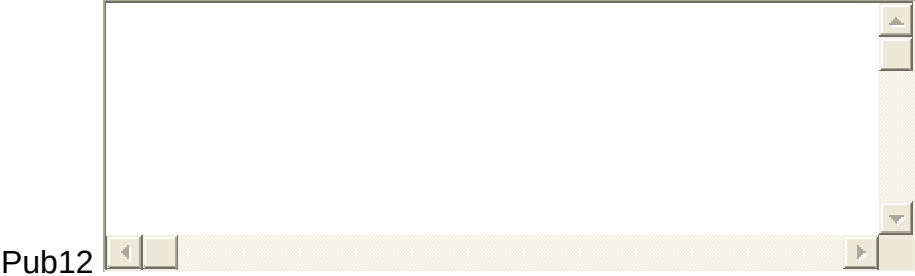
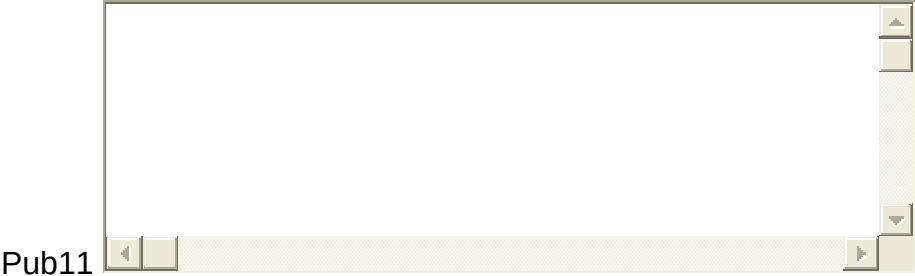
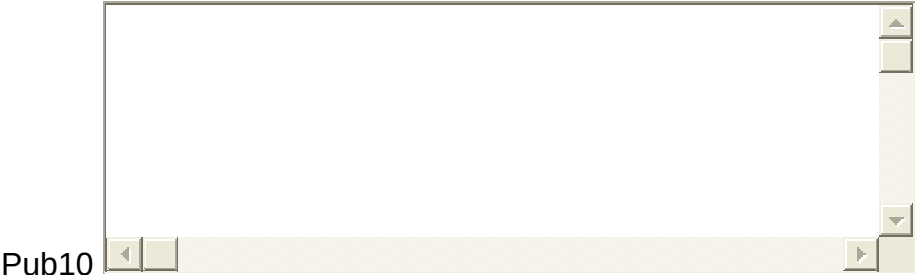
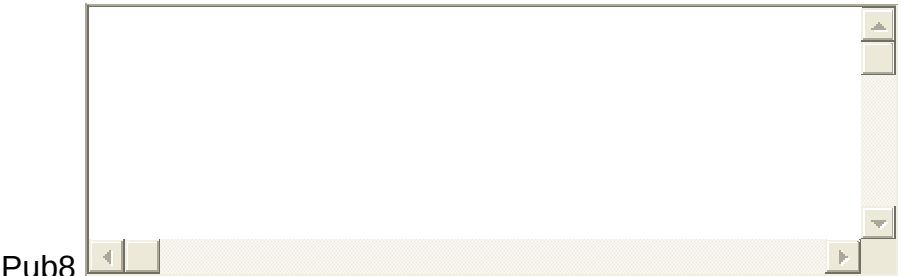
Enter your number of completed scientific presentations, any authorship order. Include any local, state, national or international conferences. Do not include class presentations or departmental presentations (e.g., brownbags, area seminars)

In the next 15 spaces, enter the citations for up to 15 of the first- or later-authored journal articles or chapters that you reported above as in print or in press. Any citation format is acceptable, but be sure to include (1) authors (2) date (3) article title (4) periodical title (5) volume (6 year). To continue, click "yes", even if you have no publications to report. *

Pub1







Pub14

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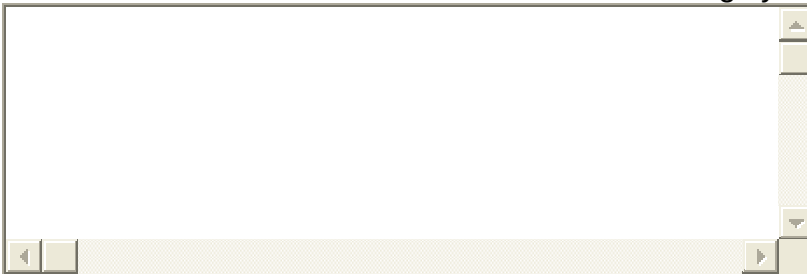
Pub15

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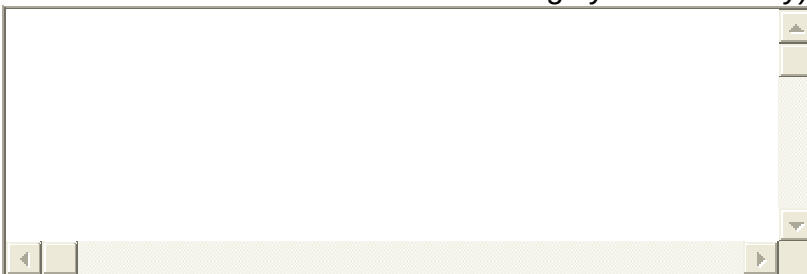
Discuss how your research and personal fit with your mentor will enhance your outcomes. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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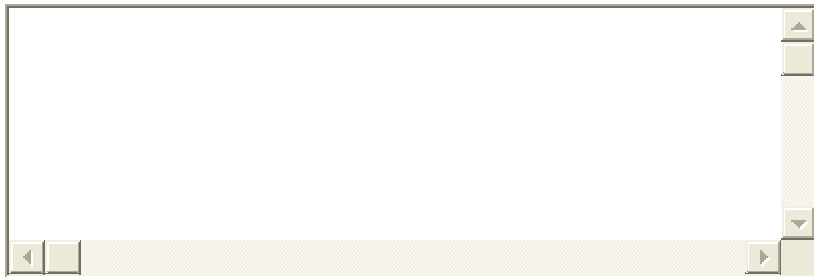
Describe why aging is primary career goal, and how it came to be this important? (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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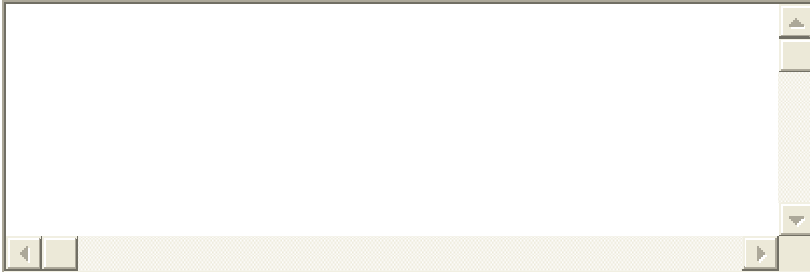
Summarize your past productivity and plans to maximize future output. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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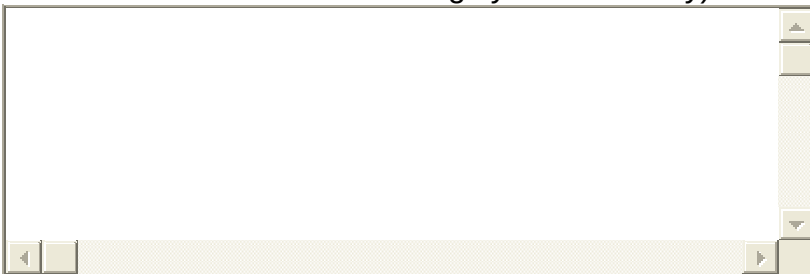
Describe your anticipated timeline until graduation. What activities and experiences do you still need/want to accomplish? (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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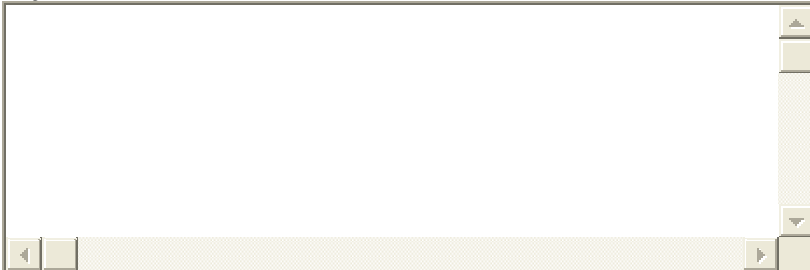
How will you ensure completion of Gerontology Certificate and 12 credits of statistics/methods. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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Discuss GRE/GPA and whether they reflect your skills/aptitudes. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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List your future career plans, including the role of NIH funding in your anticipated future. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

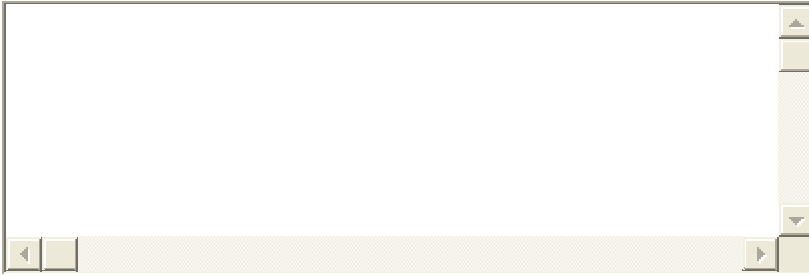
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Your primary mentor must complete an online recommendation questionnaire about you. (URL was sent under separate cover). Click "yes" to continue. *

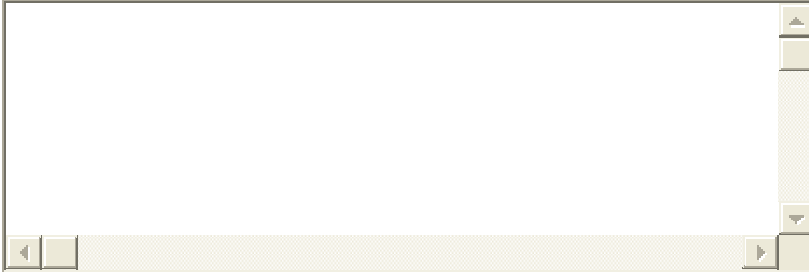
- ☐ Yes

For your major research project (e.g., dissertation) to be funded by this award, please summarize your actual/anticipated Specific Aims in the space provided below. (Warning: Try to limit this list to

250 words or less to avoid exceeding system memory) *

A large, empty rectangular text box with a light beige background and a thin black border. It features standard scrollbars on the right and bottom edges.

For your major research project (e.g., dissertation) to be funded by this award, please BRIEFLY summarize your background/theoretical rationale in the space provided below. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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For your major research project (e.g., dissertation) to be funded by this award, please BRIEFLY summarize your methods/approach in the space provided below. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

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2. Primary Mentor Evaluation

Your student has chosen to compete for a T32 funding slot, and admission to our predoctoral aging training program. In addition to THIS form, we also need recent mentor's funding history (in the final open field on this form). We need a list of the externally funded grants of which you are currently PI (for the past 5 years), as well as which PI'd grants you currently have under review. It is okay if you also list grants on which you are co-investigator, etc., but the review committee is SPECIFICALLY interested in the record of recently PI'd grants. For these grants, standard information (Title, PI, run dates, funding agency, agency grant number, person months, brief one-sentence summary) that would appear on an NIH biosketch is sufficient

* Required

Student Last name *

Student First name *

Your Email address *

Your (mentor's) name *

Your (mentor's) department name *

How long have you known the applicant? In what capacity? *

The next questions ask you to use NRSA rating criteria for this student. For each dimension, compare the student to the best individual in your current class or research laboratory.

Research Ability and Potential *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Written and Verbal Communications *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Perserverance in Pursuing Goals *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Self-reliance and Independence *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Clinical Proficiency if relevant *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Laboratory Skills and Techniques, if relevant *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Originality *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%

- ☐ n/a or unable to judge

Accuracy *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Scientific Background and Preparation *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Familiarity with Research Literature *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Ability to Organize Scientific Data *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Discuss the scientific and personal fit between you and the mentee, and how it positions the students for productivity and a scientific research career (Warning: Try to limit this list to 250 words or less to

avoid exceeding system memory) *

Comment on the student's past productivity and plans to maximize future output, and what role you (as mentor) can play in maximizing it. (Warning: Try to limit this list to 250 words or less to avoid

exceeding system memory) *

Discuss why the student is best suited to be funded by an AGING RESEARCH traineeship. The unit funding this award is NIA's Behavioral and Social research unit, and it is important that our students interests represent a good fit for their funding priorities. Why is this NIA predoctoral mechanism the best possible fit for this student? (Warning: Try to limit this list to 250 words or less to avoid exceeding

system memory) *

What do you see as this student's expected career trajectory? What kinds of positions do you see this person preparing him- or herself for? What level of distinction do you see this person as achieving? What evidence supports these expectations? (Warning: Try to limit this list to 250 words or less to

avoid exceeding system memory) *

With regard to this student, what other strengths and weaknesses should we be aware of? (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory) *

Below, I am providing a list of the externally funded grants of which I am currently PI (for the past 5 years), as well as which PI'd grants I currently have under review. I understand that I may also list grants on which I am co-investigator, etc., but the review committee is SPECIFICALLY interested in the record of recently PI'd grants. For these grants, standard information (Title, PI, run dates, funding agency, agency grant number, person months, brief one-sentence summary) that would appear on an NIH biosketch is sufficient. Please place this in the blank field below. *

3. Secondary Mentor Evaluation

One of your students has recently contacted you to write a letter of recommendation. This University of Florida doctoral student has chosen to compete for a T32 funding slot, and admission to our predoctoral aging training program

* Required

Student Last name *

Student First name *

Your Email address *

Your (recommender's) name *

Your (recommender's) department name and institution *

How long have you known the applicant? In what capacity? *

The next questions ask you to use NRSA rating criteria for this student. For each dimension, compare the student to the best individual in your current class or research laboratory. To continue, click "yes" below. *

- ☐ Yes

Research Ability and Potential *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Written and Verbal Communications *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Perserverance in Pursuing Goals *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)

- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Self-Reliance and Independence *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Clinical proficiency, if relevant *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Laboratory skills and techniques, if relevant *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Originality *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Accuracy *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Scientific Background and Preparation *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Familiarity with Research Literature *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Ability to Organize Scientific Data *

- ☐ Comparable to the best individual in a current class or research laboratory (upper 5%)
- ☐ Upper 6 to 20%
- ☐ Upper 21 to 40%
- ☐ Middle 41 to 60%
- ☐ Lower 40%
- ☐ n/a or unable to judge

Describe your association with the applicant. Comment on the above items, including other areas as appropriate, identifying the strengths and weaknesses that should be considered in evaluating the applicant's potential for a research career. (Warning: Try to limit this part of your response to 250

words or less to avoid exceeding system memory) *

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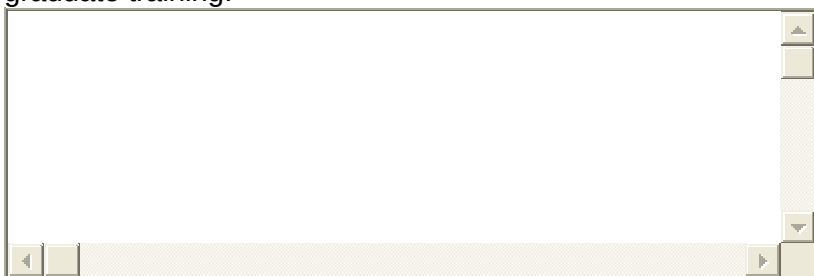
Please provide any other feedback you feel we should have in evaluating this candidate. (Warning: Try to limit this list to 250 words or less to avoid exceeding system memory)

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4. Annual goal statement

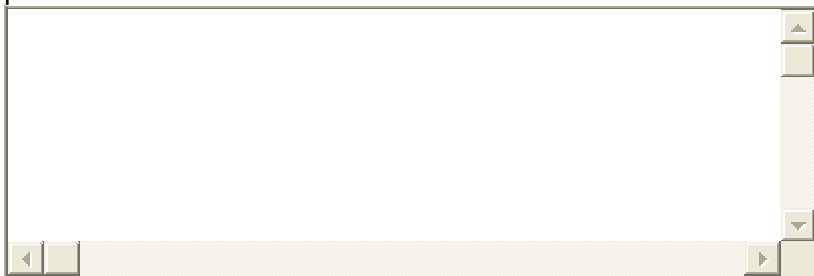
In the following sections, indicate your goals in each of the following categories

Metagoal: This expresses the career goal you think you are headed on. Example: "I hope to become an academic researcher on a tenure track appointment; enroute to this, I plan to complete a post-doctoral fellowship". The metagoal is essential for the committee to best advise you in the productivity metrics that will support your goals. This are not immutable; it is likely that goals evolve and clarify as you progress through graduate training.

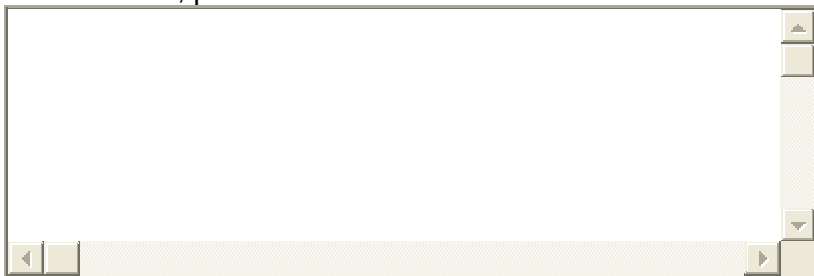


Research goals

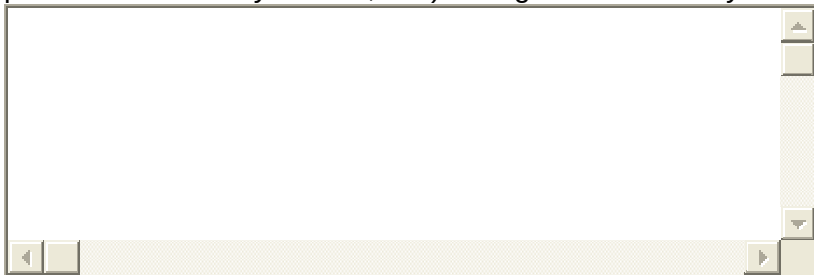
a. Publications. In the box below, list the publications you plan to submit during this academic year, in as much detail as possible (authors, title, journal, expected date of submission). If a submission is a resubmission, please indicate that as well.



b. Grants. In the box below, list any grants/fellowship you plan to submit as "PI" during this academic year. in as much detail as possible (title, funding source,, expected date of submission). If a submission is a resubmission, please indicate that as well.



c. Other. Use this space to talk about other research goals (learning a particular method, working with a particular secondary mentor, etc.) during this academic year



Education goals

a. List the courses you expect to take during this academic year. Indicate semester.

b. List any courses you expect to teach or assist with during this academic year. Indicate semester. Explain how this will help you with research metagoal development.

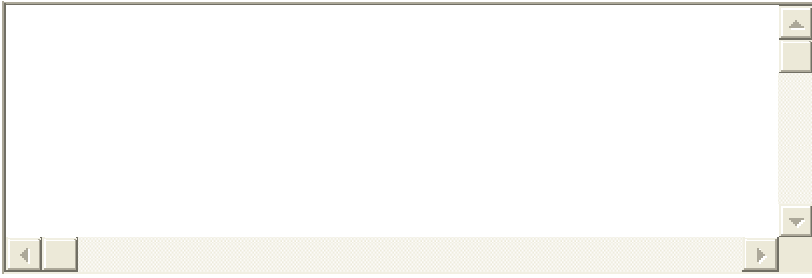
c. List any other educational experiences (workshops, conferences, colloquia) that you intend to participate in this year. Specify expected dates of participation and frequency (e.g., weekly) where applicable.

Service Goals

a. List any clinical training requirement or commitments. Explain how they will assist you with your research metagoal development

b. Describe any professional development activities (student organizations, community organizations, student membership/leadership in national organizations) that you will participate in or plan to apply/run for. After each opportunity, describe how you believe this will assist you with your research metagoal development.

List any other information you feel is relevant



5. Productivity report (submitted 3x a year)

All Trainees are required to report trii-annual progress. Please fill out this form, and email a copy to marsiske@phhp.ufl.edu and your Mentoring Committee **prior to your Mentoring Committee Meeting**. Also send updated CV.

THE REVISED AND SIGNED FORM MUST BE RETURNED 1 WEEK AFTER YOUR MENTORING COMMITTEE MEETING.

Trainee Name:	
EMAIL:	
Work Phone:	
Primary Mentor:	
Co-Primary Mentor	
Secondary Mentor:	
Secondary Mentor:	
Secondary Mentor:	
Secondary Mentor:	

Date of last meeting: N/A

Date of current meeting:

- a. **For each research project that you're working on, list title, source of support, progress and further effort needed, and significance for your future research:** Title:

Support for Research and goals

Progress and further effort:

Significance for future research:

Scholarship, teaching, training (expand or delete these sections as needed)

Manuscript (journal)	Author	Support	Planned, submitted or published
Title			

Abstract Title (or meeting)	Conference	Date	

Lectures/Classes	Location	Date	

Mentoring(baccalaureate)	Dates		

Courses, seminars or Workshops	Dates	Location	Planned, taking or attended

GRANTS/SMALL PILOT STUDIES, OTHER FUNDING:

(1) I plan to submit for the following grants, pilot studies, other funding applications (include grant title, agency (e.g., NIA, VA, AFAR, Pepper Pilot, RWJ, etc), type of grant (R01, R03, CDA), your role (PI, Co-PI, or Co-investigators), other investigators, submission due date:

(2) I currently have under review the following grants, pilot studies, other funding applications (include grant title, agency (e.g., NIA, VA, AFAR, Pepper Pilot, RWJ, etc), type of grant (R01, R03, CDA), your role (PI, Co-PI, or Co-investigators), other investigators, submission due date:

Comments:

I have met with my mentoring committee, reviewed and discussed and am in agreement with my goals as outlined in this report.

Trainee

Trainee signature

Date

6. Mentoring Compact

MENTORING COMPACT

Student/Fellow name: _____

Mentor: _____

Commitments of Mentors (Compact Between Student/Fellow and Their Mentors based on AAMC Compact)

- I intend to develop the skills needed to be a good mentor.
- I will ensure that a mutually agreed upon set of expectations and goals are in place at the outset of the training period, and I will work with the student/fellow to create an individual career development plan.
- I will strive to maintain a relationship with the student/fellow that is based on trust and mutual respect. I acknowledge that open communication and periodic formal performance reviews, conducted at least bi-annually, will help ensure that the expectations of both parties are met.
- I will promote all ethical standards for conducting research including compliance with all institutional and federal regulations as they relate to responsible conduct in research, privacy and human subjects research, animal care and use, laboratory safety, and use of radioisotopes.
- I will clearly define expectations for conduct of research in my lab and make myself available to discuss ethical concerns as they arise.
- I will ensure that the student/fellow has sufficient opportunities to acquire the skills necessary to become an expert in an agreed upon area of investigation.
- I will provide the student/fellow with the required guidance and mentoring, including scheduling prompt meetings when requested, and will seek the assistance of other faculty and departmental/institutional resources when necessary.
- Although I am expected to provide guidance and education in technical areas, I recognize that I must also educate the student/fellow by example and by providing access to formal opportunities/programs in complementary areas necessary for a successful career.
- I will provide a training environment that is suited to the individual needs of the student/fellow in order to ensure his/her personal and professional growth. I will encourage a progressive increase in the level of responsibility and independence to facilitate the transition to an independent career.
- I will encourage the interaction of the student/fellow with fellow scientists both intra- and extramurally and encourage the appointee's attendance at professional meetings to network and present research findings, including providing financial support to attend meetings where the student/fellow will be presenting findings from my research and others as possible.
- I will ensure that the research performed by a student/fellow is submitted for publication in a timely manner and that she/he receives appropriate credit for the work she/he performs.
- I will acknowledge her/his contribution to the development of any intellectual property and will clearly define future access to tangible research materials according to institutional policy.

Training Program--Specific Guidelines: (Please initial)

_____ I agree to meet at regularly with my mentee to assess progress, weekly as often as possible.

_____ I agree to develop a training plan with my mentee and to review progress regularly, including the twice-yearly evaluation.

_____ I agree to encourage and support my mentee's attendance at relevant training opportunities that come up throughout the year.

_____ I agree to actively work with my mentee towards a goal of three or more papers (not including the dissertation), with the mentee being first author on at least 1 paper (if student) and at least 3 papers (if postdoc).

_____ I agree to encourage and support my mentee's participation in any department or the Training Grant Progress Reports and web page updates.

_____ I agree to encourage and support my mentee to actively engage with their training cohort to form writing groups, network, and support each other.

_____ I understand that my mentee will be housed _____ and that student/fellows should not be exempted from work in my research or laboratory space.

_____ I agree to communicate any problems related to my mentee a member of the GRTC

Mentor's Signature: _____ Date: _____

I agree to mentor this student for the period of _____ to _____
(Annually is recommended).

7. Fellow Compact

FELLOW COMPACT

Student/Fellow name: _____

Mentor: _____

Commitments of Student/Fellow (Compact Between Student/Fellow and Their Mentors—based on AAMC Compact)

- I acknowledge that I have the primary responsibility for the development of my own career. As such, it is my responsibility to arrange meeting times and meet with my mentor regularly and my advisor at least once a semester.
- I recognize that I must take a realistic look at career opportunities and follow a path that matches my individual skills, values, and interests.
- I recognize the value of the time and energy of my mentor.
- I will develop a mutually defined research project with my mentor that includes well-defined goals and timelines. Ideally, this project should be outlined and agreed upon at the time of the initial appointment.
- I will perform my research activities conscientiously, maintain good research records, and catalog and maintain all tangible research materials that result from the research project.
- I will conduct research responsibly and ethically, including respecting all ethical standards when conducting my research, complying with all institutional and federal regulations as they relate to responsible conduct in research, privacy and human subjects research, animal care and use, laboratory safety, and use of radioisotopes, as applicable. Although education opportunities for ethical conduct will be offered to me, I recognize that it is my responsibility to take advantage of these training opportunities, and I will do so.
- I recognize that this commitment includes asking for guidance when presented with ethical or compliance uncertainties and reporting on breeches of ethical or compliance standards by me and/or others following University of Florida and Federal policies and requirements.
- I will show respect for and will work collegially with my coworkers, support staff, and other individuals with whom I interact.
- I will endeavor to assume progressive responsibility and management of my dissertation and other research project(s) as it(they) matures. I recognize that assuming responsibility for the conduct of research projects is a critical step on the path to independence.
- I will seek regular feedback on my performance and ask for a formal evaluation at least annually.
- I will have open and timely discussions with my mentor concerning the dissemination of research findings and the distribution of research materials to third parties.
- I recognize that I have embarked on a career requiring “lifelong learning.” To meet this obligation, I must stay abreast of the latest developments in my specialized field through reading the literature, regular attendance at relevant seminar series, and attendance at scientific meetings.
- I will actively seek opportunities outside the laboratory (e.g. professional development

seminars and workshops in oral communication, scientific writing, and teaching) to develop the full set of professional skills necessary to be successful in my chosen career.

- At the end of my appointment, in accordance with institutional policy, I will leave behind all original notebooks, computerized files, and tangible research materials so that other individuals can carry on related research. I will also work with my mentor to submit the research results for publication in a timely manner. By arrangement with my mentor, I can make copies of my notebooks and/or computerized files, as applicable, and have access to tangible research materials which I helped to generate during my postdoctoral appointment, according to institutional policy.

Training Program--Specific Guidelines: (Please initial)

____ I agree to attend all meetings that come up throughout the year that will benefit my career, that my program requires, and that my mentee recommends.

____ I agree to actively participate in my mentor's lab and work to produce 3 papers a year based on work done with my mentor; with at least one as first author.

____ I agree to participate in any needed reporting requirements for my mentor's research, any applicable training grant requirements, and my Department requirements, in a timely manner.

____ I agree to actively engage with my training cohort to form writing groups, network, and support each other.

____ I agree to attend department sponsored activities and extra educational opportunities as often as I can.

____ I agree to track my own account for travel and training-related expenses and submit all paperwork in a thorough, timely manner.

____ I understand that I will be housed at _____ and that I am expected

- IF A STUDENT to work in that office rather than at home as much as possible to further my networking and career development and to help ensure accountability.
- IF A POSTDOC to work in that office rather than at home.

____ I understand that there are University, College and Department requirements for the time I can spend on any outside work, clinical work not related to training or education and/or other work and agree to meet these requirements and document that I have done so if asked (if appropriate).

____ FOR POSTDOCS ONLY. I understand that job hunting is not a part of training, and any time used for this must be submitted and approved as vacation time.

Student/Fellow Signature: _____

Date: _____

Appendix D. Recruitment materials

(For letters of support from our HBCU partners, please see the final bookmark in the “Letters of Support” section)

Broad-spectrum flyers



**UNIVERSITY OF
FLORIDA**
Center for Gerontological Studies

Graduate Research Training in Aging

Core Disciplines	Communication Sciences & Disorders	• Changes in Hearing • The Aging Voice • Language Use	www.csd.ufl.edu www.php.ufl.edu/cd
	Nursing	• Recognizing Pain • Caring for the Caregiver • Improving Quality of Life	www.nursing.ufl.edu
	Psychology	• The Aging Mind • Training & Intervention • Social Cognition	www.psych.ufl.edu www.php.ufl.edu/chp
	Sociology	• Demography • Family Structures • Health & Health Disparity	www.soc.ufl.edu

Join our enthusiastic group of aging researchers! The demographics of the state of Florida make it a natural laboratory for aging research. Our unique program offers:

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Michael Marsiske, Ph.D.
Director, UF Aging Training Program
PO Box 100165
Gainesville, FL 32610-0165
(352) 273-5097 • Fax: (801) 720-5897
E-mail: marsiske@ufl.edu

Visit our training website at:
www.php.ufl.edu/marsiskelab/T32/gnadrfllo.htm
or the
Center for Gerontological Studies at:
www.geron.ufl.edu

6 December 2004

Recruitment & Retention Resources to Enhance Diversity

Program Ctrl+Click below to find the entry in this document.	Link Ctrl+Click below to go to the website.	Contact Ctrl+Click below to email the contact.	Host Office
College of Dentistry Office of Student and Multicultural Affairs	http://www.dental.ufl.edu/Offices/Student_Multicultural_Affairs/	Patricia Xirau-Probert	College of Dentistry
College of Education Recruitment, Retention, and Multicultural Affairs (RMMA)	http://education.ufl.edu/RRMA/	Michael V. Bowie	College of Education
College of Engineering Successful Transition through Enhanced Preparation for Undergraduate Program (STEPUP)	http://www.registrar.ufl.edu/catalog1011/programs/engineering/overview.html	Engineering Office of Student Affairs	College of Engineering
College of Medicine Office for Diversity & Health Equity	http://odhe.med.ufl.edu/	Donna M. Parker	College of Medicine
Disability Resource Center	http://www.dso.ufl.edu/drc/	Jim Gorske	UF Dean of Students Office
Florida-Georgia Louis Stokes Alliance for Minority Participation (FGLSAMP)	http://www.fglsamp.com/site/	FGLSAMP Central Office	FGLSAMP
Florida Opportunity Scholar Fund	http://fos.ufsa.ufl.edu/	Leslie Pendleton	Office of the Vice President for Student Affairs
Innovation through Institutional Integration Program (I³)	http://i3.institutes.ufl.edu/	Sandra Russo	UF Graduate School/International Center
National Name Exchange (NNE)	http://www.grad.washington.edu/nne/	nne@u.washington.edu	National Name Exchange
Office of Graduate Minority Programs (OGMP)	http://graduateschool.ufl.edu/student-life-and-support/diversity-programs	Laurence B. Alexander	UF Graduate School
Office of Institutional Planning and Research – Minority Facts Webpage	http://www.ir.ufl.edu/minority/index.htm	Office of Institutional Planning and Research	UF Office of Institutional Planning and Research

Recruitment Toolkit	http://www.aa.ufl.edu/Data/Sites/18/media/documents/faculty_toolkit.pdf	N/A	Academic Affairs
Research Experiences for Undergraduates (REU)	See entry for individual offices.	See entry for individual offices.	See entry for individual offices.
South East Alliance for Graduate Education and the Professoriate (SEAGEP)	http://www.seagep.ufl.edu	Anne E. Donnelly	College of Engineering
UF Admissions Office Outreach Recruiting Programs	http://www.admissions.ufl.edu/outreachmap.html	Office of Admissions	UF Admissions Office
UF Atlantic Coast-Social, Behavioral and Economic Sciences Alliance (AC-SBE)	http://gradschool.ufl.edu/grants/sbe/introduction.html	Janet P. Broiles	UF Graduate School
UF Multicultural and Diversity Affairs	http://www.multicultural.ufl.edu/	Jarrod Cruz	UF Multicultural and Diversity Affairs
UF Office for Academic Support (OAS)	http://oas.aa.ufl.edu/	Angeleah Browdy	UF Office for Academic Support (OAS)
Women's Leadership Council Mentoring Program	http://www.leadershipandservice.ufl.edu/studentorgs/wlc/mentor.php	Tracey Reeves	Center for Leadership and Service
Recruitment, Mentoring, and Retention Text Previously Used in Successful Grants			

College of Dentistry Office of Student and Multicultural Affairs

http://www.dental.ufl.edu/Offices/Student_Multicultural_Affairs/

The University of Florida and the College of Dentistry are committed to creating a student body and community of scholars that reflects the rich cultural and ethnic diversity of Florida and the United States.

Contact [Patricia Xirau-Probert](#), Director of Student and Multicultural Affairs, for more information.

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College of Education Recruitment, Retention, and Multicultural Affairs (RRMA)

<http://education.ufl.edu/RRMA/>

The Office of Recruitment, Retention, and Multicultural Affairs (RRMA) is designed to assist undergraduate and graduate students in admittance to, retention in, and graduation from the College of Education at the University of Florida. The College of Education is committed to increasing minority student enrollment and to providing focused support to underrepresented groups which includes, but is not limited to, life management skills, career exploration and development, tutorial services and leadership development.

The RRMA oversees the following programs:

- College Reach-Out Program (CROP): created in 1983 by the Department of Education, CROP is designed to supplement Florida universities' and community colleges' efforts to increase the possibility that low income and educationally disadvantaged students from grades 6 to 12 to go on to post-secondary education.
- Florida Fund for Minority Teachers, Inc. (FFMT): designed to increase the number of minority teachers in Florida's public schools. The Minority Teacher Education Scholarship program awards performance-based scholarships annually to minority students who are Florida residents and have been admitted to a teacher education program at any of the 31 participating institutions throughout Florida.
- Institute for Recruitment of Teachers (IRT): encourages college juniors of color majoring in the humanities, social sciences, and education to enter the teaching profession.
- Minority Student Education Guild (MSEG): community service-based organization advised by staff members in the Office. MSEG is open to all students and provides a variety of programs for students attending the university and children and families in the community.
- UF Alliance: interacts with schools involved in the UF Alliance, a statewide program which links the state's universities to selected public schools. The UF Alliance enhances college access for historically underrepresented urban youth by providing college outreach and awareness, engaging parents in the educational process, offering professional leadership development to educators, mentoring and fostering student leadership, and granting scholarship support in partnership and collaboration with schools and community agencies. The UF Alliance Mentoring Program provides an opportunity for students to connect with a group of peers and mentors who are knowledgeable within the university. A mentor will serve as a point-of-contact and immediate resource, providing a support network.
- The Office administers two scholarships available to minority students in the College of Education. The Minority Education Scholarship (MES) is available to minority graduate students in the college. The Minority Teacher Education Scholarship (MTES) is available to newly admitted minority students in the college and is provided by the Florida Fund for Minority Teachers, Inc.

Contact [Michael V. Bowie](#), Director, for more information.

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College of Engineering Successful Transition through Enhanced Preparation for Undergraduate Program (STEPUP)

<http://www.registrar.ufl.edu/catalog1011/programs/engineering/overview.html>

The Successful Transition through Enhanced Preparation for Undergraduate Program (STEPUP) is a highly recognized freshman engineering minority academic enhancement program. STEPUP is a multi-faceted program designed to promote academic and personal success among minority freshman engineering students. The program combines faculty and peer mentoring with team-building, industry involvement, and academic enhancement classes in engineering foundation courses.

There are two components to the STEPUP program: a six-week summer residential program, and a non-residential fall and spring semester program. In addition, participants in both the residential and non-residential programs continue to participate in study halls, tutoring, and personalized academic advising throughout their freshman year.

Contact the [Engineering Office of Student Affairs](#) for more information.

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College of Medicine Office for Diversity & Health Equity

<http://odhe.med.ufl.edu/>

The College of Medicine Office for Diversity & Health Equity offers the following programs:

- Summer Research Program in the Biomedical Sciences: an NIH-funded 10-week summer research program is offered to undergraduate students and students in the health professional schools, designed to be a mentored laboratory experience in an active UF research lab with an overarching weekly lecture series covering topics of interest to, and needed by, young scientists.
- Health Care Summer Institute: a 4-week summer camp for minority high school students with career interests in health professions.
- Minority Mentoring Program: creates a connection between current medical students and health professionals within the UF and Shands health care system.

Contact [Donna M. Parker](#), Assistant Dean for Minority Affairs, for more information.

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Disability Resource Center

<http://www.dso.ufl.edu/drc/>

It is the mission of the Disability Resource Center to foster a sense of empowerment in students with disabilities by educating them about their legal rights and responsibilities so that they can make informed choices, by encouraging them to engage in critical thinking and self advocacy and by supporting them in being successful students, campus leaders, and positive contributors to the campus community. The Disability Resource Center, in conjunction with the Division of Student Affairs, is helping students to create an

unparalleled experience where students embrace learning and diversity to become leaders in the service of the global community.

Contact [Jim Gorske](#), Director of the Disability Resource Center, for more information.

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Florida-Georgia Louis Stokes Alliance for Minority Participation (FGLSAMP)

<http://www.fglsamp.com/site/>

The Florida-Georgia Louis Stokes Alliance for Minority Participation (FGLSAMP), a National Science Foundation (NSF) Project, includes over 1,000 talented undergraduates in Science, Technology, Engineering, and Mathematics (STEM) majors. It is a coalition of twelve institutions in Florida and one in Georgia.

The primary focus of FGLSAMP is to increase the number of baccalaureate degrees granted to underrepresented students in the STEM disciplines. In addition, FGLSAMP has increased the number of students enrolled in graduate education and has placed more than 43% of STEM students in graduate programs. The Alliance continues to stress the value of the experiential exposure for all participants.

The overarching goal of the FGLSAMP Project is to increase significantly the number of students who obtain undergraduate and graduate degrees in (STEM). Several other goals include:

- To recruit increased numbers of students to the discipline at the freshmen and junior levels and graduate these students from the disciplines of their choice in 5 years (some engineering disciplines), 4 years or 2 years respectively.
- To promote improved student relationships among students and between students and faculty.
- To provide students a summer experience that will review and preview important mathematics and science concepts as a part of a plan to reduce high attrition in the freshman year.

Contact the [FGLSAMP Central Office](#) for more information.

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Florida Opportunity Scholar Fund

<http://fos.ufsa.ufl.edu/>

The University of Florida is committed to actively supporting initiatives that enable access to higher education for qualified students from all socio-economic backgrounds. However, over time, the average family income of UF undergraduates has continued to rise and the number of students from economically disadvantaged backgrounds has fallen.

President Machen approved a proposal to provide full grant/scholarship financial aid packages to first-generation-in-college freshmen Florida resident students from families who made less than \$40,000 per year. The program, which was endorsed by the UF Board of Trustees, was named the Florida Opportunity Scholars Program (FOS) and was available to first-time-in-college students enrolling summer 2006 or later. The program provides recipients a full grant and scholarship package each year for enrollment in a baccalaureate degree program. Two million dollars in grant assistance was committed for the 2006-07 inaugural year and support has since increased to \$15 million dollars in 2012-13 to fund both returning students and a new first-year class every year since 2006. The program is also assisted by private support.

Contact [Leslie Pendleton](#), Director of the Florida Opportunity Scholar Program, for more information.

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Innovation through Institutional Integration Program (I³)

<http://i3.institutes.ufl.edu/>

The I³ Program is a five-year project funded by the [National Science Foundation](#) (NSF) to foster integration of all NSF-funded student-based research and training programs in Science, Technology, Engineering, Mathematics (STEM) and Social, Behavioral, Economics (SBE) disciplines at the University of Florida.

The goal of the project is to establish the Program for Institutional Integration (I³: PII) to facilitate collaboration and dialogue among all NSF-funded programs through the synergism of their resources, capabilities, and experience to fully involve graduate students, faculty, and administration, thereby expanding the overall impact of NSF programs across campus. While focused on graduate students, I³ also involves undergraduate students, interested in STEM and SBE careers.

Contact [Sandra Russo](#), Co-PI and Program Director, for more information.

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National Name Exchange (NNE)

<http://www.grad.washington.edu/nne/>

The University of Florida is a new member of the National Name Exchange (NEE), a consortium of nationally known universities that annually collect and exchange the names of their talented but under-represented ethnic minority students who are in their junior or senior years of their respective undergraduate education. The purpose of the NEE is to ensure that participating universities continue to identify a pool of qualified students who could be recruited to the graduate programs at the institutions.

Email nne@u.washington.edu for more information.

Office of Graduate Minority Programs (OGMP)

<http://graduateschool.ufl.edu/student-life-and-support/diversity-programs>

The UF Office of Graduate Minority Programs spearheads the UF Graduate School's contribution to campus diversity by working for the recruitment, retention, and graduation of minority and underrepresented students in master's degree and doctoral degree programs. It has a twofold mission:

- Increasing the number of graduate students from underrepresented ethnic or racial groups: African-Americans, Hispanic-Americans, Native Alaskans (Aleuts and Eskimos), Native Americans, and Native Pacific Islanders.
- Providing prospective and enrolled graduate students in underrepresented demographic groups with material aid and mentoring to help in their successful pursuit of a graduate school education.

The UF Office of Graduate Minority Programs offers the following services:

- The [Campus Visitation Program \(CVP\)](#): encourages under-represented students to pursue advanced degrees. Acceptance is based on academic merit. This process facilitates recruitment of highly qualified and motivated students.
- The [Delores Auzenne Dissertation Award](#): assists under-represented minority students in completing their dissertation work. The program provides up to 13 annual competitively awarded stipends of \$5,000 each to PhD candidates who are in advanced writing stages of their dissertations.
- The [Florida A&M University \(FAMU\) Feeder Program](#): matches qualified FAMU graduates, interested in pursuing advanced degrees (particularly doctorates), with one of the three to five admission/financial aid packages reserved for them at 47 graduate degree-granting institutions each year.
- The [Florida Board of Education \(BOE\) summer fellowship program](#): provides an outstanding opportunity for newly admitted minority and first generation graduate students to become acquainted with UF.
- The [GEM Fellowship Program](#): provides funding for MS and PhD levels: MS Engineering Fellowship program (\$10,000 stipend, a minimum of two paid summer internships, and waived tuition and fees at a GEM University); PhD Engineering Fellowship Program ; PhD. Science Fellowship program (\$14,000 stipend the first year, a minimum of one paid summer internship, and waived tuition and fees at a GEM University).
- The [HBCU-UF Master's to PhD Pathway Project](#): a collaborative project between participating historically black colleges and universities (HBCUs) and the University of Florida to identify top-performing students in master's-only programs at the participating HBCUs and advancing those individuals into PhD-degree-granting programs offered at UF.
- The [Moving in the Direction of Excellence \(MADE\) Conference](#): covers the overall graduate school application process through dynamic mock classes, a personal statement workshop and the Graduate School Toolbox. It is designed primarily for minority-serving institutions (HBCUs and HCOs).
- The [McKnight Doctoral Fellowship](#): awarded to African American and Hispanic students in Ph.D. programs; fellows receive an annual \$12,000 stipend with tuition, health insurance and fee waiver for a maximum of five years.
- The [McNair Graduate Assistantship Program](#): supports students who have successfully completed the [McNair Post-Baccalaureate Achievement Program](#) as undergraduates by providing a stipend (\$12,000), in-state tuition, fees and health insurance for the first year of the PhD.
- [Professional Development Workshops](#): enhance the University of Florida experience of students who are typically underrepresented in graduate education.
- [Supplemental Retention Scholarship Program](#): supports UF doctoral students who are three or fewer semesters away from graduation, but are no longer eligible to receive a fellowship, assistantship, or other funding from their department or college.
- [UF/SFCC Development Project](#): creates a partnership between the University of Florida and local Santa Fe Community College that aims to increase faculty diversity at SFCC while providing minority and underrepresented doctoral students at UF with valuable teaching experience.

Contact [Laurence B. Alexander](#), UF Graduate School Associate Dean, for more information.

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Office of Institutional Planning and Research – Minority Facts Webpage

<http://www.ir.ufl.edu/minority/index.htm>

The Minority Facts Webpage provides reports of data related to the minority student enrollment at the University of Florida. The following reports are available:

- Enrollment: number of students enrolled in each college by ethnicity and undergraduate/graduate status for a given academic year.
- Degrees Awarded: number of degrees awarded to Black and Hispanic students by college and degree level, as represented by the University of Florida, the State University System, and the Association of American Universities.
- Graduation/Retention: graduation/retention rates for Black and Hispanic students, as represented by the University of Florida and the State University System.
- Faculty: number of Black and Hispanic faculty on staff at the University of Florida.

Contact the [Office of Institutional Planning and Research](#) for more information.

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Recruitment Toolkit

http://www.aa.ufl.edu/Data/Sites/18/media/documents/faculty_toolkit.pdf

The University's Recruitment Toolkit is available to provide guidance in successfully identifying minority recruits. This resource, in conjunction with the services of our Minority Recruitment Center, has in the past created great success in communicating with minority researchers throughout the southeastern region.

Research Experiences for Undergraduates (REU)

http://www.nsf.gov/funding/pgm_summ.jsp?pims_id=5517&org=NSF

The Research Experiences for Undergraduates (REU) program supports active research participation by undergraduate students in any of the areas of research funded by the National Science Foundation. REU projects involve students in meaningful ways in ongoing research programs or in research projects specifically designed for the REU program.

UF offers REU programs in the following areas:

- Chemistry: <http://www.reu.chem.ufl.edu/>
- Marine Bioscience: <http://www.whitney.ufl.edu/index.php/education/undergraduate>
- Physics: <http://www.phys.ufl.edu/REU/>
- Water Resources: <http://abe.ufl.edu/reu/index.shtml>

Contact the individual programs for more information.

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South East Alliance for Graduate Education and the Professoriate (SEAGEP)

<http://www.seagep.ufl.edu/>

The South East Alliance for Graduate Education and the Professoriate (SEAGEP) is a member of the National Science Foundation Alliance for Graduate Education and the Professoriate family of programs designed to increase diversity in the nation's professoriate in science, technology, engineering, and mathematics (STEM).

The program provides students with exceptional Ph.D. experiences. SEAGEP unites a group of institutions that have considerable experience in higher education diversity programs and a history of collaboration. Under SEAGEP, they offer unparalleled opportunities for graduate studies in a wide variety of STEM fields.

The SEAGEP Program includes the University of Florida as lead institution and Clemson and the University of South Carolina as primary partners. Secondary partners are the Florida-Georgia Louis B. Stokes Alliance for Minority Participation, the South Carolina Louis B. Stokes Alliance for Minority Participation, and the University of the U.S. Virgin Islands. SEAGEP also partners with The Latin American and Caribbean Consortium of Engineering Institutions.

SEAGEP offers graduate students awards, travel funding, international internships, career shadowing, professional development, and an annual meeting with students across the Alliance.

Contact [Anne E. Donnelly](#), SEAGEP Program Director, for more information.

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UF Admissions Office Outreach Recruiting Programs

<http://www.admissions.ufl.edu/outreachmap.html>

The Office of Admissions shares valuable information with students of color who are beginning the college search process. Outreach activities are established for high school and community college students to help inform, prepare, and guide them toward admission to the University of Florida.

The Office of Admissions offers the following programs for minority high school and community college students throughout the year:

- African-American Student Recruitment Conference: held each February for middle school and high school students (grades 7-11) and their parents.
- Hispanic-Latino Student Recruitment Conference: held each March for middle school and high school students (grades 7-11) and their parents.
- African-American Outstanding High School Scholars Weekend: held each July to attract the top-rising African-American seniors to UF.
- Hispanic-Latino Outstanding High School Scholars Weekend: held in late June to attract top-rising Hispanic seniors to UF.
- UF Shadow Days: held in October, the TRIO/Upward Bound African-American student Shadow Day gives invited high school seniors the “Gator for a Day” experience when they shadow current UF students in class and around campus.

Contact the [Office of Admissions](#) for more information.

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UF Atlantic Coast-Social, Behavioral and Economic Sciences Alliance (AC-SBE)

<http://graduateschool.ufl.edu/finances-and-funding/uf-sbe-program>

The University of Florida, Howard University, the University of Maryland at College Park, the University of Miami, and the University of North Carolina at Chapel Hill are individually among the nation's top 25 producers of underrepresented minority (URM) doctoral recipients in the social, behavioral and economic

disciplines. However, with the creation of the AC-SBE Alliance, funded by the National Science Foundation, the universities' plan to broaden the participation of URM doctoral students in SBE programs, produce even more Ph.D. recipients and encourage and prepare undergraduate students to enter Ph.D. SBE disciplines.

The goals of AC-SBE are to increase the number of URM students receiving PhD's in SBE disciplines and to increase the number of URMs entering the SBE professoriate. The AC-SBE seeks to achieve four objectives which will move students from undergraduate school to the Ph.D. and into the professoriate.

The objectives are to:

- Recruit and prepare undergraduates to pursue the PhD degree.
- Assist students in the transition from BS to PhD programs.
- Retain graduate students to completion of the PhD.
- Prepare future faculty for success.

The AC-SBE offers the following programs and opportunities:

- Undergraduate Research Support/Recruitment: enhances recruitment efforts and prepares undergraduate students for graduate studies. Each of the five participating departments receives two \$5,000 SBE awards per year to offer to incoming students.
- Graduate Research Support: provides two SBE research assistantship top-ups per year to go towards the research support of eligible students. Amounts will be \$2,500 for each fall and spring semesters and \$5,000 for summer research for students involved in doctoral dissertation research.
- Travel Awards for Professional Development: made to SBE Scholars to attend programs, including the Odum Institute at UNC-Chapel Hill and Howard University's Preparing Future Faculty (PFF) and Postdoctoral Workshop.
- Support/Professional Development: held once a month and are open to all graduate students. Sponsored by the Office of Graduate Minority Programs, the topics of the seminars range from getting a job, how to get published, defending a dissertation, and passing qualified exams.

Contact [Janet P. Broiles](#), Recruitment and Graduation Coordinator for UF Graduate Minority Programs, for more information.

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UF Multicultural and Diversity Affairs

<http://www.multicultural.ufl.edu/>

UF Multicultural and Diversity Affairs promotes an inclusive campus community by creating environments in which students learn about themselves and diverse others and engage in meaningful intercultural dialogue.

The Dean of Students Office strives to provide a safe environment that supports and encourages the acceptance and appreciation of various cultures and heritages that comprise the university community. The Multicultural and Diversity Affairs staff at the Dean of Students Office assists students of color, including African-American, Asian-American, Native American, Hispanic/Latino, and multi-racial; gay, lesbian, bisexual, and transgender students; and services for women students and student organizations, in their personal development by providing programs and initiatives that educate, motivate, and challenge them as members of the University of Florida. UF Multicultural and Diversity Affairs staff offer programs in cultural awareness and understanding, leadership, mentorship, social justice, and community building.

The following program areas comprise UF Multicultural and Diversity Affairs:

- [Asian Pacific American Affairs \(APAA\)](#): provides support, assists in the personal development, and advocates for the needs of Asian Pacific American students while promoting awareness of APA issues throughout the UF community.
- [Institute of Black Culture \(IBC\)](#): serves as a resource for all the members of the university community, providing educational and social programming that focuses on black culture. The IBC also serves as a support network for many black students on campus.
- [The Institute of Hispanic-Latino Cultures \(La Casita\)](#): as the first institute of its kind in the southeastern United States, La Casita strives to promote diversity by educating students about various Hispanic/Latino cultures.
- [Intercultural and Social Justice Programming](#): provides intercultural and social justice programming that strives to equip students with the tools necessary to excel in a multicultural society and create positive social change.
- [Lesbian, Gay, Bisexual, and Transgendered \(LGBT\) Affairs](#): provides education, advocacy, and support for lesbian, gay, bisexual, transgender, queer, questioning, and straight-allied students, staff, and faculty at the University of Florida. LGBT Affairs strives to create a safer, more welcoming campus by raising awareness about sexual orientation and gender identity and ensuring that all Gators can work and study free from bias and discrimination.
- [University Minority Mentor Program \(UMMP\)](#): initiated in the fall of 1986 and designed to address the issue of retention of African-American and Hispanic students at the University of Florida. The UMMP is designed to provide a supportive and nurturing experience for the personal and intellectual development of the first-year African American and Hispanic students. To facilitate this process, each mentee is paired with both professional mentors (faculty) and a peer mentor (upper division student).

DiversityWeb (<http://diversityweb.multicultural.ufl.edu/>) outlines various programs, resources, and services designed to promote outreach to minority and underrepresented students at UF, as well as educating all students about the value of diversity and provide resources to faculty and staff. This website provides links to news, a calendar of events, support services for current and prospective students, as well as faculty, staff, and alumni resources.

Contact [Jarrod Cruz](#), Director of Multicultural and Diversity Affairs, for more information.

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UF Office for Academic Support (OAS)

<http://oas.aa.ufl.edu/>

As part of the University of Florida's effort to enhance the awareness and appreciation of diversity among students, faculty, and administrators at the University of Florida, the Office for Academic Support (OAS) coordinates the University's support services for first generation and/or underrepresented students and faculty.

The mission of this office is to:

- Enhance recruitment, retention, follow up support, and graduation of the University's first generation and/or underrepresented students.
- Enhance recruitment and retention of underrepresented faculty.

- Encourage and support higher education among first generation and/or underrepresented students and underrepresented faculty.

Supportive services offered or arranged include academic workshops and learning experiences which cover such topics as study skills, time management, career planning, library skills, stress management, and test anxiety. Other services provided are student assemblies/information sessions, academic progress oversight, tutoring, and advocacy. These activities are designed to facilitate first generation and/or underrepresented generation students' successful negotiation of any and all processes of the University of Florida and to stimulate their use of and participation in resources and activities that enhance academic progress.

A cadre of trained Peer Tutor Mentors comprises the frontline contacts for these students. These Peer-Tutor Mentors assist students in making a smooth transition to the university environment. This relationship begins during the summer and continues throughout the freshman academic year. Peer-Tutor Mentors help students to develop coping and social adjustment skills by providing a positive association with successful peers and role models. The OAS staff establishes and maintains a cooperative relationship with the parents of enrolled students and actively encourages their involvement with their student's college career.

Contact [Angeleah Browdy](#), Director of OAS, for more information.

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Women's Leadership Council Mentoring Program

<http://www.leadershipandservice.ufl.edu/studentorgs/wlc/mentor.php>

The Women's Mentoring Program strives to create a more supportive learning environment on the University of Florida campus community by providing undergraduate women with the tools and guidance of those who have truly "been there" and exposing and confronting stigmas concerning women in leadership roles.

Contact [Tracey Reeves](#), Advisor, for more information.

Proposal Summary

Proposal Number: Proposal Status:
Sponsor Deadline: 05/25/2013 Submission Method:
Submission Type: Application

INVESTIGATOR DATA

PROJECT DIRECTOR / PRINCIPAL INVESTIGATOR CONTACT INFORMATION

Prefix: First Name: Middle Name: Last Name: Suffix:
Michael Marsiske

Position/Title: Associate Profe Organization: University of Florida Board of Trustees
Department: HP-CLINICAL / HLTH PSYCHOLOGY Division: COLLEGE-PUBL HLTH / HLTH PROFS
Street1: Department of Clinical and Health Street2: PO BOX 100165
Psychology HPNP Room
City: GAINESVILLE County: Alachua
State: FL Zip Code: 32610-0165
Country: USA Employee ID: 32348020
Phone: 3522735097 Fax: 8017205897
Email: marsiske@phhp.ufl.edu

First Budget Period Effort: Calendar: Academic: Summer:

Status of PI:

Status Waiver Required?

Signed Intellectual Property Waiver Attached?

Signed Conflict of Interest Disclosure Attached?

Agency Certification Documentation Attached?

Cost Sharing Authorization Form Attached?

SPONSOR DATA

Agency: National Institutes of Health
Proposal Type
Sponsor Mechanism: Ruth L. Kirschstein National Research Service Award
(NRSA) Institutional Research Training Grants
(Parent T32)

Sponsor Type:

Sponsor Code:

Sponsor Name:

SubDivision 1:

SubDivision 2:

PROJECT DATA

Title of Project: Physical, Cognitive, and Mental Health in Social
Context

Is This a Subcontract?

If Yes, who is prime?

Type of Proposal:

Type of Agency:

Kind of Application: Resubmission

Previous Grant # or Federal Identifier: AG020499

Change in grantee institution? No

Type of Project:

PROJECT ADMINISTRATION

Who is responsible for this research?

Departmental Identification Number: Primary:

Secondary:

Departmental Name: Primary:

Secondary:

Primary Dept. Contact Info: Primary:

Secondary:

Account Classification: Primary:

Secondary:

Other Institutional Code:

NAICS Code:

Proposal Summary (cont'd)

COMPLIANCE DATA

Are animal subjects used? No
 Is IACUC review pending?
 IACUC Protocol #
 IACUC Approval Date:
 Are human subjects used? No
 Is IRB review pending?
 IRB Protocol #
 IRB Approval Date:
 Does this project involve use of any of the following? Radioactive Material(s), Radiation Producing Devices(s), Recombinant DNA, Biohazardous Chemical(s), Class IIIb or IV Lasers, Other certifications of health, safety and/or environmental compliance.

BUDGET DATA

Performance Dates	Begin Date	End Date	
First Budget Period:	<u>05/01/2014</u>	<u>04/30/2015</u>	
Cumulative Budget Period:	<u>05/01/2014</u>	<u>04/30/2019</u>	

Cost Sharing Information	Mandatory	Voluntary
Committed:		
Amount:		
Source:		

Budget Period	Direct Cost	Indirect Cost	Total Cost
Total:	<u>1,597,056</u>	<u>65,355</u>	<u>1,662,411</u>

AWARD DATA

Award #: Contract #: Date:

Budget Period	Direct Cost	Indirect Cost	Total Cost
Total:			

EXPORT CONTROL

1. Will the project involve participation, collaboration or access to information by foreign nationals, defined as: individuals with foreign citizenship, foreign governments, foreign associations and corporations, or foreign political parties? Note: Foreign nationals granted US citizenship, or permanent residence "green card" or granted status as a "protected individual", e.g., political refugees and political asylum holders are "EXEMPT" from deemed export rule.
2. Will the project involve the shipment of equipment, technology, software, materials data or other information?
3. Will the project involve a foreign subcontract or other foreign contractual agreement?

COMMENTS AND EXPLANATIONS

PLEASE INDICATE ANY SPECIAL INSTRUCTIONS BELOW:
