2025 Data Preparation Sheet – **Postdoctoral: Program & Admissions**

Program Information\*

1. Training year start date: \_\_\_\_\_ / \_\_\_\_\_ /\_\_\_\_\_

 (mm) (dd) (yyyy)

*This should be the actual start date for the 2024-2025 academic year. The system will automatically calculate and display the academic year start and end dates based on the previous ARO’s reporting period. If you cannot enter your desired start date, contact the office.*

2. Has your program experienced any significant changes in financial support during the

 current training year? \_\_\_\_Yes \_\_\_\_No

 If yes, please describe the changes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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3. URL for the webpage that contains the data required in [*IR* C-23 P](https://irp.cdn-website.com/a14f9462/files/uploaded/Section%20C_022822.pdf)*,* titled “Trainee Admissions, Support and Outcome Data”: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. URL for Program’s website *(if applicable)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Number of hours required to complete program: \_\_\_\_

Residents\*

|  |  |
| --- | --- |
| 1. Number who applied to program for 2024-2025 admission:
 |  \_\_\_\_\_\_ |
| 1. Number who were offered admission into program for the 2024-2025 year:
 | \_\_\_\_\_\_ |
| 1. Number of new residents who were full-time in the 2024-2025 training year:

 *(Number of full-time residents)* |  \_\_\_\_\_\_ |
| 1. Number of new residents who were part-time in the 2024-2025 training year:

 *(Number of part-time residents)* |  \_\_\_\_\_\_ |
| 1. Number of new residents who were funded fully:
 |  \_\_\_\_\_\_ |
| 1. Number new residents who were unfunded or not fully funded:
 |  \_\_\_\_\_\_ |
| 1. Number of hours per week required for full-time resident:
 |  \_\_\_\_\_\_ |
| 1. Minimum stipend for full-time resident for 2024-2025 training year:

 *(Enter U.S. dollar amount, digits only and no commas)* |  \_\_\_\_\_\_ |
| 1. Number hours per week required for part-time resident:
 |  \_\_\_\_\_\_ |
| 1. Minimum stipend for part-time residents for 2024-2025 training year:

 *(Enter U.S. dollar amount, digits only and no commas)* |  \_\_\_\_\_\_ |

Supervisors\*

|  |  |
| --- | --- |
| 1. Number of Training Supervisors: *(Staff who are involved with planning/implementation of the program and who have direct*  *contact with trainees)* |  \_\_\_\_\_\_ |
| 2. Number of Agency/Institution Supervisors: *(Staff who are not involved in planning/ implementation of the program but who have direct*  *contact with trainees)* |  \_\_\_\_\_\_ |
| 3.1 Number of Other Contributors: *(Staff who are not involved in planning/ implementation of the program and who do not have*  *direct contact with trainees, but who provide training opportunities)* |  \_\_\_\_\_\_ |