

Grant Writing Mentorship Financial Support Request Application

Name _____ Title _____

Department _____

Funding Agency _____

Outcome for 3 most recent applications (application name, date submitted, score and percentile, funding decision)

Application Deadline _____

Faculty mentor name _____

Downstate Department _____

Institution of external mentor _____

Contact information, including email, of external mentor

Provide reasons for your choice of mentor and an outline of how your mentor will assist you with your application, including time commitment on part of the mentor.

To be completed by the investigator:

I commit to fulfilling all of my obligations to work with the requested faculty mentor.

Signature:

Date:

To be completed by the mentor:

I have agreed to be a faculty mentor for Dr. _____ and commit to fulfilling all of my obligations to work with them.

Signature:

Date:

SVPR Office

Request approved

Yes

No

See Comments

Comments

David Christini, PhD, SVP for Research

Date: