**MENTOR PORTION OF APPLICATION:**

**(A NIH biosketch for mentor that includes grant support must be submitted with the student application)**

|  |  |
| --- | --- |
| Name: | Dept.: |
| Phone: | Email: |

TRAINING ENVIRONMENT: Describe the nature and frequency of your planned, direct interaction with the student. Identify individuals who will participate in the student's technical and scientific training. Describe conferences and lab meetings the student will attend. Describe the facilities and resources available for the proposed project in your lab or elsewhere. (The space expands as needed; use up to 1.5 pages.)

|  |  |
| --- | --- |
| If the proposed project involves radioisotopes, vertebrate animals, or human subjects or material; provide the following relevant information. | |
| Radiation Safety | Approval Date: |
| Authorized User: | AU #: |
| Institutional Animal Care and Use: | Approval Date: |
| Principle Investigator: | IACUC Protocol #: |
| Title of IACUC Protocol: | |
| Institutional Review Board | Approval Date: |
| Principle Investigator: | IRB Protocol #: |
| Title of IRB Protocol: | |