

RESEARCH APPLICATION

First Name:	Enter First Name Here	Last Name:	Enter Last Name Here	
Check one:	<input type="checkbox"/> M1	<input type="checkbox"/> M2	<input type="checkbox"/> M3	<input type="checkbox"/> M4
	<input type="checkbox"/> PGY1	<input type="checkbox"/> PGY2	<input type="checkbox"/> PGY3	<input type="checkbox"/> Fellow
Phone #:	Enter Phone Number Here			
Email:	Enter Email Address Here			

General Information/NOTES:

Please note that by completing this application, you are applying to work on a Research Project for a one-year period, which begins in June and ends in May. If you want to continue working on this project, you must re-apply annually. Any outcomes of this project is considered the property of The University of Toledo.

Research Project Title:			
Contributions you bring:	<input type="checkbox"/> Literature Searches	<input type="checkbox"/> Statistics	<input type="checkbox"/> Surveys
	<input type="checkbox"/> Lab Testing	<input type="checkbox"/>	
Time Commitment:	How many hours per week, on average, would you be available for this project?		Enter Hours Here
CITI Training	<input type="checkbox"/> Yes	If yes, date completed:	<input type="checkbox"/> No

Additional Notes:

~ OFFICE USE ONLY BELOW THIS LINE ~

Approve?:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	