MEDICAL SCHOLARS PROGRAM
Athens, Georgia

INSTRUCTIONS:
Please complete this fillable PDF application and submit it to the Student Applicant. It will be the student's responsibility to submit ALL of the MSP paperwork at one time to the Curriculum Office. *The Mentor Application Form contains a Support Statement that needs to be printed on a separate page* and emailed or given to the student with your application.

For questions or concerns, please contact:
Leslie Petch Lee, PhD
Associate Dean for Academic Enhancement & Campus Integration
Director, Medical Scholars Progeam
(706) 713-2182 or lpetch@uga.edu

MSP MENTOR APPLICATION FORM		
MENTOR INFORMATION		
Name (Principal Investigator):		
Institution:		
Department:		
Office Address:		
City:	State:	ZIP Code:
Email:		
Lab/Office Location (Site of work performance):		
Phone Number:	Lab/Office Phone Number:	
STUDENT INFORMATION		
Name:		
Student Email:		
Project Title:		

MSP MENTOR APPLICATION FORM

INSTITUTIONAL COMPLIANCE COMMITTEE INFORMATION

1. Where will the project be conducted?   AU Campus ▭   AU Medical Center ▭   UGA ▭   Other ▭

2. If the project involves **humans, human blood or tissue, or human data** (including review of charts):

   - Provide the existing IRB approval #:

   - Provide the existing title:

   - Provide the named PI:

   - **NOTE: Projects requiring a new IRB application will not be funded.**

3. If the project involves **animals**:

   - Provide the existing IACUC File #:

   - Provide the existing title:

   - Provide the named PI:

   - **NOTE: Projects requiring a new IACUC application will not be funded.**

4. If project is performed in a **laboratory**:

   - Provide the PI's Institutional Chemical #:

   - Provide the address of the laboratory to be used:

5. If project requires use of **radioisotopes**:

   - Provide the PI's User Authorization #:

MENTOR SUPPORT STATEMENT (Please attach a separate sheet):

In the Support Statement, the mentor should discuss the following elements:

1. Description of ongoing research activities.
2. Identification of current research support pertinent to student's project.
3. **Assurance that the student will be added to the appropriate IRB protocol.**
4. Description of what the student is expected to accomplish and the mentor's role in the process.
5. Assurance that the student will have appropriate work space, reasonable access to supplies, and access to the mentor's time.
6. Assurance that the mentor will help craft and review the Scholarly Abstract for the student's education portfolio, as well as, the poster for presentation at the **Annual Medical Scholars Research Day.**

Save this form before you submit it.