

T32 GM139807 IMSD Graduate Student Scholar Application Coversheet

Please direct questions to T32IMSD@wayne.edu or contact the MPDs or program manager with any questions:
Steven Banks – ee3036@wayne.edu, 313-577-1387.

Applicant Name: _____

Year: _____

Department: _____

Mentoring Statement

I, [_____] give my Department permission to release a copy of my application packet from the Admissions database to the IMSD Steering Committee as part of my application to the IMSD program.

Student Signature

Date

For IMSD Use Only:

Application packet

Telephone/Zoom interview completed

Student notified of decision Date: _____

Director notified of decision Date: _____

Signature of PD who provided notifications