

MD/PhD Rotation Approval Form

This form must be completed and mailed to mdphdadmin@ohsu.edu before starting the rotation. An email chain of approvals can be substituted instead of electronic signatures.

Student name:

Proposed mentor name:

Proposed start date:

Proposed end date:

What are your research interests in this lab?

List Mentor's funding from the past 5 years. Each entry should include: Funding source, Grant type, funding period. Do not need to include all, but should show sufficient funds are available if student were to join lab permanently.

Number of current trainees in lab. Include type of trainees (I.e. 1 graduate student, 2 post-docs)

List a few trainees who've recently completed their training in this lab and where they are now (no need to list more than 5):

A recent publication from this mentor's lab.

Proposed Mentor: any constraints on space for this student in your lab? (For example, you have two students rotating but only space and funding for one.)

Proposed Mentor signature:

Required approval signatures:

SOC Member 1:

SOC Member 2:

SOC Member 3:

MD/PhD program director