

## 2014-2015 New Investigators' Grant Writing Institute Attestations and Endorsements

Participant Informa	tion									
First Name		Last Name								
Title										
School										
Department										
Email						Work	Phone			
Participant Attestat	tion									
By signing below, I agree, if selected, to participate fully in the 2014-2015 Grant Writing Institute activities (as relevant). This includes cohort meetings (approximately one per month), large workshops, peer review of proposals, agency visits, mock panel reviews, and work with my mentor. I agree to develop a proposal for extramural funding by Summer 2015 as advised by Institute facilitators and my mentor. I agree to provide feedback for evaluating this program.										
Participant Signature								Date		
Participant's Depar	tmental Endo	rsement								
By signing below, my department agrees to support the above named researcher's participation in the 2014-2015 Grant Writing Institute with release time (as appropriate) and provide evaluative feedback to the program.										
Chair/Designee Sign	ature							Date		
Chair Name (print)										
Email						Work	Phone			
Mentor Information	n									
First Name					Last Nam	ne				
Title					•	•				
School										
Department										
Email						Work	Phone			
Mentor Attestation										
By signing below, I agree, if selected, to participate in the 2014-2015 Grant Writing Institute activities as fully as my schedule allows. This includes the Kick-off meeting, reviewing my mentee's proposal drafts, helping prepare my mentee for the agency visit, peer reviews, and panel reviews, and providing individualized guidance to my mentee (e.g. connecting him/her to professional networks and resources, etc.) in preparation for a planned proposal submission by Summer 2015. I agree to provide feedback for evaluating this program. I understand that I will receive \$300.00 in a departmental account for my active participation.										
Mentor Signature								Date		
Mentor's Departme	ental Endorse	ment								
By signing below, m time (as appropriate					s participat	ion in t	he 2014-201	15 Grant W	riting Institute with	ı release
Chair/Designee Signature								Date		
Chair Name (print)										
Email						Work	Phone			

Complete and sign this form, and save as a PDF. Upload it and your biographical sketch to your on-line 2014-2015 Grant Writing Institute Application Form. All documents must be received by 5:00pm on Friday, August 4, 2014. Questions? Contact Jessica Venable at <a href="mailto:jevenable@vcu.edu">jevenable@vcu.edu</a> or 827-1443.