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| Applicant Information |
| Name: |       |
| Title/Rank: | [ ]  Associate Professor  | [ ]  Professor |
| Time in Current Rank at NDSU: |       |
| Tenure Status: | [ ] Tenure-Track | [ ]  Tenured  |
| College(s): |       |
| Department(s)/School(s): |       |
| Phone Number(s): |       |
| NDSU E-mail: |       |

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| Justification  |
| Briefly explain how this mentoring team will help you achieve your career goals and advancement.       |

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| Team |
| List the members for the proposed team. Include name, rank, tenure status, department and email address.       |

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| Total Amount Requested | $       |

Please submit *all* of your application materials *by email* to ndsu.forward@ndsu.edu. The subject line must read “Mid-Career Peer Mentoring Grant Application”. Make *sure* to carbon copy your department chair/head, dean, and all team members.

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| Contacts | Name | E-mail |
| Dean: |       |       |
| Department Chair/Head: |       |       |
| Department Administrative Assistant: |       |       |

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| Checklist of Application Materials |  |
| [ ]  NDSU Advance FORWARD Mid-Career Peer Mentoring Grant Program application form [ ]  Budget with justification[ ]  Curriculum Vitae (for each team member) |