

Name:

Title:

Institution:

Yes, I am interested in applying for the 2020 Diversity Research Supplement Award. Please add my name, institution and the following description of my research project to the “DRSA opportunity list” to be posted on the DF website. I am interested in receiving inquiries from medical students who may wish to complete a short-term research project under my supervision next year.

Provide a brief description of the research project the medical student will be working on (no more than 150 words).

Please identify the email or other contact information medical students should use to send inquiries.

Email:

Other Contact Information:

Signature: _____ **Date:** _____

Please return this form to dfrap@dermatologyfoundation.org or via fax to 847-328-0509 no later than October 11, 2019. Thank you.