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| **2024 John Wallace Diversity Program Application**  Please fill out form and send along with it a current curriculum vitae to Dr. Sabrina Scroggins at:  **sscroggi@d.umn.edu**  Any questions about completing this application can be directed to Dr. Scroggins. |
| **Specify your diversity qualification according to NIH Guidelines (https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html):** |
| **AIC2024 abstract title:** |
| **Name (Last, First):** |
| **Email address:** |
| **Telephone**: |
| **Training level (postdoctoral fellow or graduate student):** |
| **U.S. Citizen or permanent resident (YES or NO)?** |
| **Institution and address:** |
| **Career objectives and Research interests (one paragraph up to ten sentences):** |
| **Publications (indicate as meeting abstract or manuscript, and include PMID if available):** |
| **Referee #1 full name:** |
| **Her/his email address:** |
| **Referee #2 full name:** |
| **Her/his email address:** |