**APPLICATION FORM**

**Developing Research Agendas through Mentoring (DREAM)**

**EMAIL COMPLETED APPLICATION AS ONE PDF TO YOUR DEAN**

**NO LATER THAN 5 PM, March 15, 2018**

If you are selected to participate in DREAM, you will be one of approximately seven faculty engaged in a year-long professional development and mentoring program. The professional development sessions (trainings, workshops, panels, etc.) will take place on a monthly basis over the course of the year. These sessions will cover a range of activities related to the process of becoming a successful externally funded Principal Investigator, and also address faculty needs and concerns related to research and other scholarly activities.

All formal professional development sessions will be held on Fridays. By completing this application, you are committing to attending 80% of these sessions.

Name:

Department/College

Phone/email

Faculty Rank

1. Do you have any past grant writing experience (funded or unfunded)?

Yes\* \_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_

\*You are not eligible for DREAM if you received a state or federal grant

2. Please provide 5 keywords to describe your research area

3. Provide a personal statement (500 words max.) addressing the reasons why you would like to participate in the DREAM. How does it align with academic career goals/research agenda/ statement of expectations?

4. Mentor Information

Name of mentor

Department and Institution

Phone and email for mentor

Why have you requested this person as your mentor (50 words max.)?

5. Provide your **CV**, highlighting areas of research interest.

6. Attach **Mentor NOMINATION FORM (follow format below)**

If I am selected for DREAM, I agree to participate fully in the Program’s monthly meetings, interact with mentor, and complete reports, projects, and documents as requested.

Applicant’s E-Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**MENTOR NOMINATION FORM**

**Developing Research Agendas through Mentoring (DREAM)**

Mentor NAME:

Organization:

Candidate NAME:

***INSTRUCTIONS:*** *Please describe the nominated faculty member’s capabilities in the following areas (use additional space if needed):*

*1. Has an active research or creative activities agenda that contributes or will contribute to the discipline*

*2. Has established an area of specialization in the literature*

*3. Has received external funding for research and creative activities*

*4. Demonstrates an interest in involving students in his/her research*

*5. Will commit to actively participating in DREAM activities*

*AND please describe:*

*6. the specific support you will provide the nominated faculty member DURING and AFTER participation in DREAM.*

Mentor E-Signature and Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_