



**Digestive Disease Research Foundation  
2012-2013 DDRF Medical Student Research Grant Application  
Deadline: April 15, 2012**

Name: \_\_\_\_\_

Current Matriculation: \_\_\_\_\_ Expected Graduation: \_\_\_\_\_

Undergraduate Institution: \_\_\_\_\_ Graduation Date: \_\_\_\_\_ GPA \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have another sources of research funding? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe briefly \_\_\_\_\_

Does this project represent a full-time commitment for the student during the academic year 2012-13? \_\_\_\_\_ Yes \_\_\_\_\_ No

If part-time, please estimate the % time commitment of this project \_\_\_\_\_..

How long have the physician mentor and student known each other and under what context?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach the follow items:**

- 1. Curriculum Vitae and/or Resume.**
- 2. Current Student Transcript**
- 3. Letter of Recommendation**
- 4. Student personal statement ( $\leq 1$  page), indicating reasons for interest in current clinical study and professional goals.**

**Please submit application and supporting material to:**

Email: [ddrf.ddrf@yahoo.com](mailto:ddrf.ddrf@yahoo.com)

FAX: 212.996.6677

Or mail to:

Digestive Disease Research Foundation

311 East 79<sup>th</sup> Street #2A

New York, NY 10075

Phone: 212.996.1105

For more information about the Digestive Disease Research Foundation please visit  
[www.digestivedisease.org](http://www.digestivedisease.org)