

# CELLULAR AND MOLECULAR MEDICINE SPECIALIZATION

## CMMS Fellowship Application Form

Name \_\_\_\_\_

CSU Student ID No: \_\_\_\_\_

E-Mail \_\_\_\_\_

Address (Home) \_\_\_\_\_

(Work) \_\_\_\_\_

Phone (Home) \_\_\_\_\_

(Work) \_\_\_\_\_

Home Doctoral Program \_\_\_\_\_

Overall Graduate GPA \_\_\_\_\_ Relevant CMMS Course GPA \_\_\_\_\_

Submit an updated CMMS Student Record Form showing program and specialization requirements already completed.

Brief description of dissertation research: \_\_\_\_\_

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Also submit the following documents with the application:

1. Transcript (unofficial)
2. Letter of Recommendation from Departmental Advisor and/or Research Advisor (pre candidacy) or Dissertation Advisor (only) (post candidacy). The advisor must be graduate faculty and part of the CMMS program. It is expected that a student will pass a comprehensive/candidacy exam before, or at a time of CMMS award.
3. One page statement of research goals, current progress on project, and benefits expected from the research fellowship for your graduate career.
4. Up-to-date CMMS student record must be on file in home department and CMMS office.

Return form and supporting material to:

Dr. Anton A. Komar, CMMS Director

Cleveland State University

2121 Euclid Avenue, SRC259

Cleveland OH 44115

e-mail: a.komar@csuohio.edu