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De	ear Potential Mentor,
	has identified you in his/her research thesis project
	Name of Medical Student a primary mentor who can ensure the success of the student in meeting all program requirements d deliverables. If you consent, we ask that you:
1.	Submit your CV or biosketch immediately to the Medical Student Research Thesis Program (email
	shahrzadbazargan@cdrewu.edu). Submit the online Human Subject Biomedical and/or Social and HIPAA certificates. Provide dedicated time to the mentee:
	<ul> <li>In developing the Research Protocol (template available online)</li> <li>In mentoring and assisting them throughout the implementation and completion of the research project</li> </ul>
	<ul> <li>To oversee the IRB clearance process. This may include the development of the IRB application, the review process, and the submission of a continuation/final report</li> <li>Attend the CDU Med Student Research Colloquium (4<sup>th</sup> Wednesday in March in student's 4<sup>th</sup> year)</li> <li>Provide an annual evaluation of the student's progress and accomplishments at the end of his or</li> </ul>
6.	her third and fourth year (template and examples will be provided). Sign off on your mentee's Research Question, Final Research Protocol, IRB documents and his or her final draft thesis, before it is submitted to the CDU Research Thesis Committee (RTC) for review.
То	pic/Title of thesis (if known):
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Th	MENTOR CRITERIA e CDU research thesis program seeks to cultivate the following student abilities and skills in
de	signing, implementing and reporting their projects. Please consider emphasizing these in your entoring relationship:
1.	<b>M</b> otivated. He or she is a self-starter, and need not be constantly encouraged, managed or directed.
	Efficacious. The student is appropriately confident in his or her abilities.
3.	A good <b>N</b> avigator. The student is able to find and use appropriate tools and resources in conducting his or her own research.
4.	Targeted. The student is adequately and sincerely focused on, and dedicated to, his or her research.
5.	
6.	
	e mentor's signature below will attest to his or her commitment to this research project, and to its ccessful completion.
— Me	ntor's Name and Degree (Print)  Signature & Date

Mentor's Email Address

University Affiliation (Print)