

**FACULTY SPONSOR'S RECOMMENDATION/COMMITMENT FORM
FACILITIES AND COMMITMENT STATEMENT
SUMMER RESEARCH TRAINING PROGRAM**

Sponsorship of Veterinary Student with Prior PhD Degree

Name of Applicant _____

Comments of Sponsor:

A: Summarize research facilities available in your laboratory and state if the facilities are adequate for carrying out research proposed by the applicant.

B: Comment on applicant's qualifications.

C: Please indicate total number of graduate, professional and post-doctoral students who will be under your direct supervision during the period of the proposed fellowship.

Certification: This certifies that if this fellowship is awarded, appropriate training, adequate facilities, supplies and supervision will be provided.

Sponsor also agrees to fund a stipend of \$1,833.33 per month for the months of June, July and August (total \$5,500).

Name of Sponsor _____

Office Telephone _____ **Email** _____

Address _____

Signature of Sponsor _____ **Date** _____