Be prepared to answer the following Mentoring Innovation Awards Qualtric Survey Questions:

Project Title

Department within UC Davis Schools of Health

Project Lead.
  • Please provide full name of faculty member applying for funding.
  • Email
  • Series & Rank

Department administrative contact (i.e., CAO).
  • Provide full name
  • Title
  • Email

Department/Center/Division Mentoring Director. Please provide full name.

ABSTRACT/SUMMARY OF YOUR PROPOSAL
  • Provide a brief summary of your proposal and a statement of the problem you are attempting to address, as it relates to mentoring.
  • List your objectives. What do you hope this project/program achieves? How will this idea enhance the mentoring in your department?
  • How will your project benefit diverse or minority faculty or fellows?
  • Describe how the results/outcomes will be evaluated.
  • Provide the timeline for implementation.
  • Provide a brief budget and list of activities.

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List your objectives. What do you hope this project/idea achieves?

How will this idea enhance the mentoring in your department?

How will your project benefit diverse or minority faculty or fellows?

Describe how the results/outcomes will be evaluated.

Please tell us the timeline for implementation.

Amount of funding requesting
Tell us how you intend to spend these funds. Please describe each activity in the first box and tell us the cost anticipated for each activity in the next box.