

**Thomas L. McDonald Distinguished Graduate Student Award
Application Form****Student Name:** _____**Student Email:** _____**Student Phone Number:** _____**Student Start Date at UNMC (Month/Year):** _____**Faculty Advisor:** _____**Society from which the candidate received an award:** _____**Name of the society award received (include notice of award):** _____

Name of conference: _____**Dates of conference:** _____**Title of the presentation** (include an accepted abstract of the presentation and CV highlighting research/ service achievements since joining the IPID program):**Student's Signature:** _____**Faculty Advisor's Name:** _____**Faculty Advisor's Signature:** _____

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Application Form**

Student: _____

Abstract:

Personal Statement: