## COM/MCI POSTDOCTORAL FELLOW REQUEST

Last Name:	First Nam	e: M.I.: _	
E-mail Address:			
Ph.D. Award Date:			
		DPT □ H-1B □ Other:	
Mother's Maiden Name:		International ID:	
Principal Investigator:			
Proposed Dates of Employment: Start		End	
Description of Research Project with Fel	lows responsibilities a	nd Supervisor (if not the PI):	
Funding Source and % Effort:			
If grant funded, give grant expiration da	te:		
Salary Amount:			
□ <b>\$56,484</b> (0 yrs. exp.) □ <b>\$56,880</b> (1 yr. e	exp.) 🗆 <b>\$57,300</b> (2 yrs	exp.)	
□ <b>\$59,592</b> (3 yrs. exp.) □ <b>\$61,572</b> (4 yrs.	exp.) <b>□ \$63,852</b> (5 yrs.	exp.)	
□ Other: \$ Explan	nation:		
Department EQAD for Packground Chec		to a grapt):	
Department FOAP for Background Chec	k ( <u>cannot</u> be charged	to a grant):	
Copy of Job Description attached (as r	equired by the Office o	of Immigration and International Admissio	ns)
🗆 Copy of Curriculum Vitae attached		□ Appointment Form attached	
D Offer Letter attached		Background Check Form attached	
□ Budget/Grant Information approved b	oy Dept.		
PI's Name – please print	PI's Signature	Date	_
□ Approved			
Changes Requested – Explanation:			
Robert Barrington, Ph.D.	Date	Alani Rodgers, M. Ed.	Date

Robert Barrington, Ph.D. Office of Research Education and Training

Alani Rodgers, M. Ed. Office of Research Education and Training