



National Kidney Foundation[®]

Serving Maryland and Delaware

NKFMDE Professional Development Award Application

2020-2021

Institutional Commitment Verification

Instructions: This form must be completed *only* on behalf of applicants for NKFMDE *Professional Development Awards*. It must be signed by the appropriate Department Chair or Division Director and submitted in PDF format to research@kidneymd.org and received no later than 5:00pm, Monday, March 16, 2020.

Applicant Name: _____

Institution: _____

Project Title: _____

Statement of Institutional Commitment:

My signature at the conclusion of this statement serves as verification of institutional commitment to the above named applicant for a National Kidney Foundation Serving Maryland & Delaware Professional Development Award, providing assurances that during the grant period the applicant will have a minimum of 50% protected time for research and access to appropriate and necessary space and resources. A commitment has been made to the applicant for an academic appointment, with the title of _____.

Department Chair or Division Director Name

Title

Signature

Date