



The SMHS Center
for Faculty Excellence

The Quill & Quirk Writing Lab: A Medical Education Researchers Community of Practice

Application Form

Due January 16th, 2024

Name(s):

Department(s):

Academic Rank(s):

Email(s):

Cell Phone(s):

Applicant's Commitment

If selected, I will attend sessions and complete the related pre and post-session work to maximize my learning.

Signature: _____ Date: _____

Chair/Division Chief/Supervisor's Commitment

I support this application and will release the applicant from all duties on February 20th and 21st 2024

Printed Name: _____

Electronic Signature: _____

Date: _____

Submit this completed document and the following items in one PDF using this naming convention, Last Name/First Initial.

- What is your specific medical education research question? (no more than 4 lines).
- What approach have you considered using (quantitative or qualitative) to address your research question? (no more than 4 lines).
- Please provide the target grant URL and application deadline.
- Please add any additional information related to interprofessional collaboration or team diversity.

(One form can be completed if 2 individuals are applying together. Simply add information for both individuals)