

# JOIN A PROJECT

PLEASE EMAIL THIS FORM TO [MPCRN@USUHS.EDU](mailto:MPCRN@USUHS.EDU) AND WE WILL CONTACT YOU SHORTLY.

## CONTACT INFORMATION

First and Last Name:

Email Address:

Organization Name or Site:

## PROJECT INVOLVEMENT

Which current MPCRN project would you like to join?

How would you like to participate with this project?

Leadership role

Scientific role

Supporting role

Other:

What are your goals in joining this project? *Examples: Get published, meet residency/faculty requirement, achieve grant funding, greater good, etc.*

How did you hear about MPCRN? *Examples: Website, colleague, program director, other, etc.*

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*Thank you for your time in completing this form.*

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