

**Fund for Medical Discovery (FMD)
Clinical Fellowship Awards**

One Year MGH ECOR Postdoctoral Fellowship Awards

Form for Chief of Department or Unit

The following applicant _____ is a research fellow/post doc
(Name of applicant)

Department/Unit

The department fully endorses this application and will provide the research space and other resources necessary to support the research proposed in the application if it is funded.

Name of Chief

Signature of Chief

Date

OPTIONAL

Comments, if any: