



M E M O R A N D U M

**To:** MD/PhD Research Mentors  
**From:** Daniel A. Walz, PhD, Director  
MD/PhD Combined Degree Program  
**Subject:** MD/PhD Research Mentor Agreement  
**Date:** April 1, 2023

You are invited to serve as a Research Mentor for MD/PhD students at the Wayne State University School of Medicine’s MD/PhD program. Your signature, as well as the signature of your Department or Program Chair/Director, below will confirm your acceptance of the responsibilities of research mentors for students in this program, as detailed below:

- (i) Interest in the MD/PhD program;
- (ii) Agreement to have the trainees follow the recommended MD/PhD integrated curriculum most currently in place;
- (iii) Agreement to permit the trainees to receive half-day per week of clinical exposure during 6 months of each year of PhD training, as outlined in the MD/PhD integrated curriculum most currently in place;
- (iv) Agreement to assume **all financial support** (stipend, tuition, insurance, etc) for the student during the PhD years, **beyond the first year. At the present time, this package totals to approximately \$59,500 per year**
- (v) Agreement to provide the MD/PhD program administration, in a timely manner, with all evaluations and documents related to trainee progress, as required by the program;
- (vi) Adherence to all program policies most currently in place

**Mentor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Chair/Director Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Department/Graduate Program:** \_\_\_\_\_

*Please send the original signed copy to:*  
MD/PhD Program Coordinator, Deanna Doña  
Office of Biomedical Graduate Programs  
1128 Scott Hall  
[ddona@med.wayne.edu](mailto:ddona@med.wayne.edu)