

BURROUGHS WELLCOME FUND
INVESTIGATORS IN THE PATHOGENESIS OF INFECTIOUS DISEASE
PROGRESS REPORT
TITLE PAGE

Awardee Name: _____

Institution: _____

BWF Award Program: _____

Project Title: _____

BWF Request ID Number: _____

Year Grant Awarded: _____

Total Amount Funded: _____

Progress Report Period: _____

Duration of Grant (in years): _____

Grant Year This Report Covers:

☐First ☐Second ☐Third ☐Fourth ☐Final ☐No Cost Extension

Report Due Date: _____

Size of your research group (*include all members of research group*):

_____ Technicians	_____ Undergraduate Students
_____ PhD Students	_____ PhD Postdocs
_____ MD Students	_____ MD Postdocs
_____ MD/PhD Students	_____ MD/PhD Postdocs
_____ Clinical Instructor	_____ Non-Tenure Track Faculty
_____ Other	_____ Junior Faculty (tenure track)

Advisory Committee Mentor: _____

Date Submitted: _____