



Certificate Program Progress Report

Center for Clinical and Translational Science (CCaTS)

Educational Resources

Instructions: Form **must be typed** and submitted 3 months after submitting your research proposal or when requested by your education specialist. Submit to Marissa Hansen, CCaTS Education Resources, Plummer 3. Email: hansen.marissa@mayo.edu

Scholar Name <i>(Last, First, Middle)</i>	Mentor Name <i>(Last, First)</i>
Research proposal title	
Number of cases/subjects/charts proposed	
Number of cases/subjects/charts reviewed	
Data analysis completion date <i>(Month DD, YYYY)</i>	
Barriers identified and plan to overcome barriers	
Additional comments	

Writing Status

Draft reviewed by mentor <i>(Month DD, YYYY)</i>	Manuscript submission date to CCaTS <i>(Month DD, YYYY)</i>
Mentor comments	

Scholar Signature	Date <i>(Month DD, YYYY)</i>
Mentor Signature	Date <i>(Month DD, YYYY)</i>