

Information for Potential Application Reviewer

If you are interested in becoming a reviewer for an IHS funding opportunity, please fill out the following information and return this form to the Indian Health Service, Division of Grants Management. You can send it via e-mail to GrantsPolicy@ihs.gov, or via fax to 301-443-9602 – ATTN: Paul Gettys

Contact Information:

Name: _____

Phone (primary): _____ Cell? Home? Work?

When may we use this number to reach you? _____

Phone (secondary): _____ Cell? Home? Work?

When may we use this number to reach you? _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Please see our Web page for current Funding Opportunities, at <http://www.ihs.gov/dgm>.

Funding Opportunities you are interested in reviewing:

Brief professional experience or qualifications that enable you to be a reviewer: