

Hope Funds of Cancer Research

ACCEPTANCE OF AWARD

I realize that the Hope Funds for Cancer Research Postdoctoral Fellowship Award is given to a limited number of individuals and accept this award with a good-faith intention of completing the full two-year term. It is understood by all parties that this award in no way constitutes an employer-employee relationship between the Hope Funds for Cancer Research and the recipient. I hereby certify that upon acceptance of the Fellowship, I will accept no other salaried awards, fellowships, or grants from other sources for the duration of this award and consent to the use of my name, photograph and description of discoveries related to this award as well as subsequent discoveries to the extent such discoveries have been made publicly available by Institution or such descriptions do not jeopardize Institution's intellectual property rights therein, in connection with Hope Funds' solicitations and publicity of its activities. All the following parties agree to abide by the terms set forth in the Award Statement.

Fellowship recipient's signature:	Date:
Sponsor's signature:	Date:
Technology Transfer Officer's signature:	Date:
Institutional signature:	Date:

Specific types of difficult-to-treat cancers to which project relates:

How is the project innovative? (in layman's terms):