

Joseph and Elizabeth Walder Scholarship Program

ASSOCIATE COURSEWORK APPROVAL FORM

Complete the first section, print and provide to your supervisor for approval. Upload this completed form to your

Associate:

application prior to submission.	
Application ID# (from e-app or emails) IDT-#	Email Address
Associate's Name (print or type)	Phone Number ()
Enrolled Coursework/Major:	Degree/Certification:Associate's degree Bachelor's degree Graduate degree Professional certification
Supervisor:	
associate's supervisor. Coursework can be for underg	e at Integrated DNA Technologies and approved by the raduate or graduate study, and must be taken at an accredited oming academic year. Professional certification coursework is
Please complete the following and return to the association	ciate to be uploaded with his/her scholarship application.
Is the coursework relative to the associate's role at I	ntegrated DNA Technologies? Yes No
Please describe how the coursework is relative to the	associate's role at Integrated DNA Technologies:
Do you approve of the associate's coursework? □ Yes	s □ No
Supervisor's Name (print or type)	Job Title:
Email Address	Phone: ()
Supervisor's Signature	Date

The completed form must be uploaded with the application.