

The University of British Columbia
Faculty of Medicine
Postgraduate Medical Education
Clinician Investigator Program

TRAINING MODULE APPLICATION FORM

CANDIDATE

Last Name

First Name

Initial

Email

To identify candidates eligible for the UBC CIP scholarship, please answer the following:

Was your MD degree completed in Canada? Yes No

Will your CIP research be conducted at UBC? Yes No

Funding Requirement One (1) year Two (2) years

Department/Specialty/Residency Program:

Date of entry into residency program and current PG year:

Program Director:

Email

PRIMARY RESEARCH SUPERVISOR'S INFORMATION:

Last Name

First Name

Initial

Email

Title:

Department:

Institution:

Areas of Research:

Specialty and sub-specialty:

RESEARCH SUPERVISOR 2'S INFORMATION:

Last Name

First Name

Initial Email

Title:

Department:

Institution:

Areas of Research:

Specialty and sub-specialty:

DEGREE(S) SOUGHT

Degree Type:

Degree Name:

Institution:

Start Date: Expected date of completion:

LOCATION WHERE RESEARCH WILL BE CONDUCTED

Institution/Organization:

Faculty/School:

Department/Division:

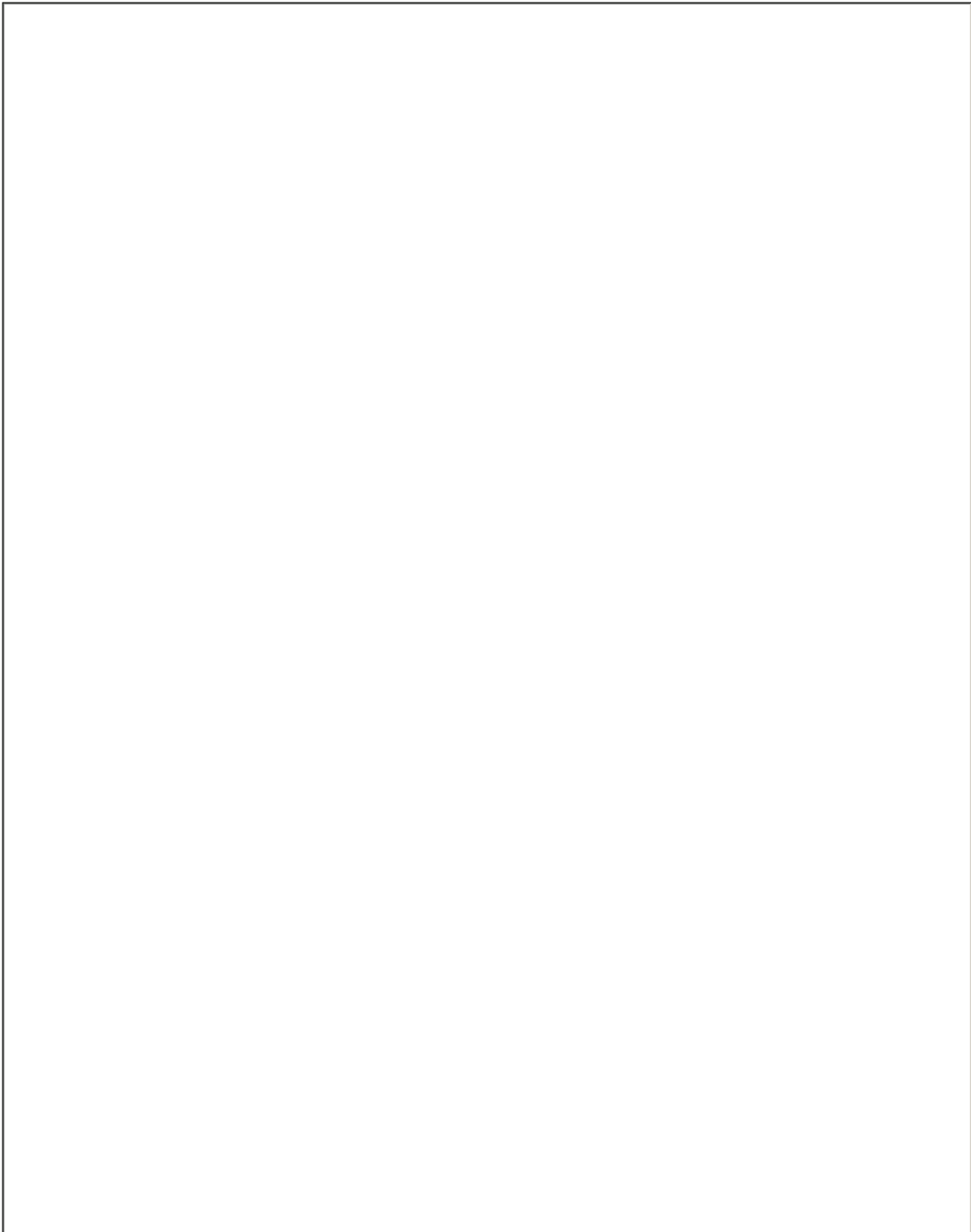
LAY TITLE OF RESEARCH (One line only)

ABSTRACT (Suitable for preparation of a press release, limited to 200 words including symbols and spaces)

DESCRIPTORS: (Provide up to 10 keywords to describe this research project):

TRAINING EXPECTATIONS/CAREER GOALS

Provide an overview describing how your research training or current training relates to the present proposal and elaborate on your career goals. Describe how the training you expect to acquire will contribute to your productivity and to the research goals you hope to achieve and how this award will enable you to establish yourself as an independent researcher. Indicate why you decided upon training and what you expect to learn from the training experience (one additional page may be added and numbered 4a).



OVERVIEW

REASONS FOR SELECTION OF A NON-UBC TRAINING ENVIRONMENT

Describe the unique aspects of the training environment that are not currently available in Canada. An additional page may be added.

SPACE, FACILITIES AND PERSONNEL SUPPORT

Describe the space, facilities and personnel support which will be available to the candidate. An additional page may be added.

PERCENTAGE* OF TIME TO BE SPENT ON DIFFERENT ACTIVITIES

Indicate below the percentage of time to be spent on different activities. Trainees are expected to spend at least 80% of their time in research training.

Research

Clinical work

Other (please specify)

**The total percentage of time for all activities cannot exceed 100%*

LIST OF PROPOSED SUPERVISORY COMMITTEE, AND ANY OTHER FACULTY OR SCIENTISTS WHO WILL BE INTEGRAL TO THE RESEARCH TEAM OR COLLOBORATE WITH THE TEAM.

Include name,
title,
department,
institution, and
Email address

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**SCHEDULE OF
REGULAR
MEETINGS
WITH
SUPERVISOR
AND
SUPERVISORY
COMMITTEE:**

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Projection of national or international meetings to be attended:

Please identify two external funding sources to which you have applied or are expected to apply during your CIP training:

Summary of operating funds or research support of supervisor (attach an additional page, if required):

REFEREES

The candidate is responsible for ensuring that an appropriate reference/assessment letter is completed (please see Appendix for details). Candidates must have two (2) referees and these include their residency program director and their most recent research supervisor (or someone they worked with closely in a research environment). A letter of support must also be submitted from the candidate's prospective research supervisor. Additional reference letters may be added, addressing similar points detailed in the appendix.

List the names below, whose assessment and support accompany this application.

Referee 1 (Name/Relationship to Candidate)	<input type="text"/>
Current Position Held	<input type="text"/>
Department/Institution	<input type="text"/>
Referee 2 (Name/Relationship to Candidate)	<input type="text"/>
Current Position Held	<input type="text"/>
Department/Institution	<input type="text"/>
Prospective Research Supervisor	<input type="text"/>
Current Position Held	<input type="text"/>
Department/Institution	<input type="text"/>

SIGNATURES (E-signatures are acceptable . Electronic signatures are either in a jpeg file or an authorized Acrobat certified signature).

Candidate	<input type="text"/>
Printed Name/Date	<input type="text"/>
Primary Supervisor	<input type="text"/>
Printed Name/Date	<input type="text"/>
Program Director	<input type="text"/>
Printed Name/Date	<input type="text"/>

PROPOSED TRAINING PROGRAM

Research Project Title and Summary

This section consists of text to be attached and should be completed in collaboration with the proposed supervisor (s), signified and confirmed via his signature on page 8.

Attached documents may be prepared in the word processing software package of your choice.

Follow these guidelines to prepare your attached documents:

Header left hand side: Research Proposal

Header right hand side: Indicate your name (last name, first name)

Header center: Title of your research proposal

Footer: Insert page number 10, 10a, 10b, 10c, 10d

Use font size 12, Times New Roman, black ink. Six lines per inch (regular space). No condensed type or spacing allowed. 1" margins on each sides.

Text to be attached:

Introduction/Background

Summary of the research project. Include the specific hypothesis of the research and describe the candidate's role on the project. This summary should be written in general scientific language. A maximum of three to five (3-5) pages is allowed. Page limits exclude references, charts, graphs and timeline.

APPENDICES (Check the appropriate boxes)

NOTE: Referee assessments and/or letters must be sent electronically to the CIP Program Manager, tessa.feuchuk@ubc.ca by November 1st.

- Completed Training Module Application Form
- Applicant's CIHR funding, academic CV, completed and validated via Common CV. Draft copy not acceptable.
- Supervisor's CIHR funding, academic CV, completed and validated via Common CV. Draft copy not acceptable.
- Two (2) referee assessments and/or letters addressing the areas below.

1. How long have you know the candidate?
2. Describe the situation(s) in which you have had an opportunity to interact with the candidate. Maximum of one paragraph.
3. Provide your perspective on the candidate's potential to become a highly productive, independent researcher. Maximum of one paragraph.
4. Describe evidence that the candidate has demonstrated independence and capacity for critical thought. Related concepts include intellectual curiosity, inventiveness, analytical capacity and leadership. Maximum two paragraphs.
5. Describe evidence that the candidate has demonstrated a capacity to pursue knowledge energetically and with clarity of objectives. Related concepts include organization, determination and patience. Maximum of two paragraphs.
6. Describe evidence that the candidate has demonstrated creative thinking. If they have had an opportunity to conduct research, please refer to their creativity in setting research goals, designing experiments, designing new methodologies, interpreting and presenting results in writing. Maximum two paragraphs.
7. Your view of the candidate's most significant achievement (indicate the candidate's most significant achievement to date). If the candidate has an opportunity to conduct research, you should describe their most significant research contribution.

- Letter of support from the candidate's prospective research supervisor indicating sources of potential and secured operating research funds, training goals and proposed commencement date of research work.
- A signed letter from the Department and Division Head indicating that the department will not offer the candidate job opportunities, which will disrupt the resident's ability to complete the CIP (see our website for template).

Submit one (1) PDF copy by due date , November 1st via email to tessa.feuchuk@ubc.ca