## Canadian Lung Association: Fellowship and Studentship Application Form 2023

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| 1. Application Information |
| **Applicant’s****Name:**  |  |
| **Applicant’s****Mailing Address:**  |      *Street Address:* |      *Apartment/Unit #* |
|      *City* |      *Province* |      *Postal Code* |
| **Phone # :** |       | **Email Address** |       |
| **\*Gender (Optional)** |  | **\*Do you consider yourself a member of a racialized community? (Optional)** | **YES NO**☐ ☐ |
| **Applying for:** | **Please select the competition to which you are applying.** **☐ CLA: Studentship Award (PhD)****☐ CLA: Fellowship Award (Post-Doctorate or MD Fellow)** **☐ Full time ☐ Part-time**  |
| **If you are not a Canadian citizen, are you a permanent resident, protected person, or international student with a study permit?** | **YES**☐ | **NO**☐ | **If YES, provide date:**       | **Include photocopy of the official document at the end of your application** |
| **Have you completed your MD or PhD degree?** **YES** ☐  **NO** ☐If yes**, MD degree ☐ PhD degree ☐** Date of completion:**If MD,** are you licensed in Canada?**YES** ☐ **NO** ☐ | **If no,** what year of doctoral studies will you be entering in September 2023**YEAR 1** ☐ **YEAR 2** ☐ **YEAR 3** ☐ Candidates are only eligible to apply for the Studentship Award in the first 3 years of their doctoral studies |
| **Supervisor(s) name(s), department, email, and institution at which applicant will undertake proposed research project.****Supervisor:**      **Co-Supervisor (if applicable):**       |
| **List up to five (5) key words which identify your research project:**1.
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| **Title of research project:**      |
| **Canadian Institutes of Health Research 4 Pillars:**Applicants must estimate what proportion of the proposed research and proposed project budget falls under the four health research themes.  |
| **Basic Biomedical:**       **%****Health Services/Systems:**      **%**  | **Clinical:**       **%****Social, cultural, environmental and population health:**      **%** |

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| **2. Payment Details** |
| Institutional Financial OfficerFull Name:       Title:       | Details of where funds should be sentAddress:      City:      Province:      Postal Code:      Phone:      Fax:      Email:       | Cheque payable to (institution):      |

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| 3. Signatures and Disclaimer |
| Applicant – By signing below the applicant confirms that all the eligibility criteria of this award (Studentship/Fellowship) are met, and that the applicant is not currently barred from applying to The Lung Association or any other research funding organization (e.g. CIHR, NSERC, SSHRC, provincial funding organizations) for reasons of breach of standards of ethics or integrity (i.e. financial or scientific misconduct). The applicant’s signature also confirms that the applicant agrees to abide by all regulations and policies governing this award (Studentship/Fellowship), if granted.  |

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| Signature of Applicant: |  | Date:       |
| Supervisor’s Signature |
| Supervisor’s Name:       | Signature: | Date:       |
| Co-Supervisor’s Name | Signature: | Date:       |
| Institution Signatures |
| Dean’s Name:       | Signature: | Date:       |
| Head of Department Name:      **Department:**      **Institution:**       | Signature: | Date:       |

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| 4. Academic Background (include current and past degree programs) |
| **Degree** | **Name of Discipline** | **Department, Institution, and Country****Name of the supervisor** | **Month and year started** | **Month and year awarded / expected** |
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| 5. Academic, Research and Other Relevant Work Experience |
| **Position held and nature of work – begin with current**(Full Time/Part Time) | **Organization and Department** | **Supervisor** | **Period Held**(mm/yyyy-mm/yyyy) |
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| **If there has been any interruption in pursuit of your scientific career either in or subsequent to training, provide explanation. List the period and reason for interruption.** |
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| **6. Scholarships and other awards held (start with most recent)** |
| **Name of Award** | **Value**(CDN$) | **Level**(Institutional, Provincial, National,International) | **Type**(Tuition, Travel, Stipend, Salary, Other) | **Province / Country**  | **Period Held**(mm/yyyy-mm/yyyy)  |
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| 7. Membership in professional and scientific societies |
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| **8. Publications** |
| a) TOTAL number of: Papers       Abstracts    \_\_\_\_\_\_  b) List all publications – include all authors, title and journal citation information starting with the most recent. Please separate list using the following 4 specific headings:“*Peer Reviewed Papers: Published & in Press*”,“*Submitted papers* (confirmation letter from journal should be appended)”,“*Abstracts*”,“*Non-peer Reviewed Publications*”.Do NOT include papers “In Preparation”. For multi-authored papers on which you are NOT primary author, please specify the details of your contribution. |
| Papers - Published Peer Reviewed and In Press: |
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| Papers - Submitted for peer review: |
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| Conference and Meeting Abstracts |
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| Non-Peer Reviewed (e.g. Books, Book Chapters, Proceedings) |
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| **9. Describe your proposed career path and motivation, explaining how this project will help you achieve this goal. (Maximum one (1) page).** |

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| **10. Progress Report (Maximum one (1) page). Applicants must summarize their research experience and specify how it will be relevant to this application.** |
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| **11. Structured Lay Summary (Maximum one (1) page,**  |
| The CLA places a high priority on ensuring that the research it funds is relevant to its mission.Using the outline provided below, provide a lay summary of the research proposal in non-scientific, everyday language at a level no greater than Grade 8. Use analogies, simplifications, and generalizations rather than scientific and technical terms. **Applications without a response to each sub-section will be considered incomplete. The Lung Association reserves the right to decline incomplete applications.**This summary will facilitate communications to the public and our donors about the research supported by the Canadian Lung Association. |

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| a) Statement of the health problem or issue |
|       |
| b) Objective of your project |
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| c) Describe your research methodology |
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| 1. What is unique / innovative about your project?
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|       |
| 1. A clear and concise description of how the proposed research is relevant to the Lung Association’s mission statement, i.e. how will the outcomes of your project improve the lung health of Canadians.

*The mission of The Lung Association is to lead nationwide and international lung health initiatives, prevent lung disease, help people manage lung disease and promote lung health.* |
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| **12. Proposed Research (Maximum two (2) pages includes figures, tables, and photos (References are on a separate page))** |
| Describe the rationale, hypothesis, objective and experimental approach of the proposed research and the timeline. Clearly indicate the aspects of the project for which you will be responsible. |

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| **The research proposal was written by:****Candidate ☐ Proposed supervisor(s) ☐ Both ☐**  |
| **The undersigned agree that this accurately describes the training program.** |
| Primary Supervisor      | Secondary Supervisor      | Candidate      |

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| Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **13. Supervisor Section (Maximum one (1) page, not including these instructions)** |
| The Supervisor must provide an overview of the research and academic training environment. Include details of resources, programs, technologies, training opportunities available to the candidate, and of any specific knowledge and skills to be acquired. In addition, give your specific involvement in applicant training. Indicate what will be the contribution of the applicant to the proposed research. If more than one student or fellow will be carrying out research using the same research project, describe the role of each in the overall plan.The role of all co-supervisors must be clearly stated and an estimate of the percentage of time spent supervising the applicant must be given.**Attach a pdf copy of the supervisor’s (and co-supervisor’s, if applicable) CIHR Academic CCV to the end of this application form.** |

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| 14. Ethical and Safety Considerations |
| Assurance is given that any human experimentation will be acceptable to the institution on ethical grounds and comply with the “Tri-Council Policy Statements: Ethical Conduct for Research Involving Humans” and that in the case of laboratory animals for animal experimentation, the guiding principles enunciated by the Canadian Council on Animal Care will be adhered to, and that the proposed research will not be undertaken until it has been accepted as meeting the requirements regarding biological and chemical hazards as outlined in the Health Canada “Laboratory Biosafety Guidelines”. In addition, any research involving human pluripotent stem cells must adhere to the “Human Pluripotent Stem Cell Research: Guidelines for CIHR-funded Research”. Funding will not be released until evidence of institutional is approved.Does this research involve any: ☐Human subjects ☐ Human pluripotent stem cells ☐ Animals ☐ Not applicableIf applicable, ☐ Form Included ☐ Form to be sent |

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| 15. References |
| You are required to have two (2) individuals references. One referee should be your current supervisor whose assessments accompany this application complete a **Referee Assessment Form** directly to The Lung Association via research@lung.ca. These references are confidential. **Reference letters are not acceptable.** |

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| **Reference 1 (Current Supervisor)** |
| **Name:** |       |
| **Title:** |       |
| **Mailing Address:** |       |
| **Email Address:** |  |

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| **Reference 2 (Previous supervisor)** |
| **Name:** |  |
| **Title:** |  |
| **Relationship to Applicant:** |  |
| **Mailing Address:** |  |
| **Email Address:** |  |

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| 16. Submission Checklist |
| **Tasks (all applicants)** | **Completed** |
| Submit **abstract** by **April 5, 2023 by 16:00 EDT** | **☐** |
| Completion of the **CLA: Fellowship and Studentship Application form** by **April 26, 2023 by 16:00 EDT** | **☐** |
| For PhD applicants, current official or certified true copies of transcripts, degree certificates, registration certificates, etc. are attached for all relevant degrees and qualifications – transcripts that are sent directly from the educational institution should be sent to research@lung.ca  | **☐** |
| For Fellowship applicants, proof of completion of MD or PhD (if completed in time for nomination) | **☐** |
| Copies of residency documents or proof of status for applicants who are not Canadian citizens | **☐** |
| Supervisor’s (and co-supervisor if applicable) CIHR Academic CCV or NIH-biosketch for international co-supervisors | **☐** |
| Signed letter from supervisor, department, host institution, and/or a partner agency confirming value and source of matching funds. See guidelines for amount. | **☐** |
| Signatures | ☐ |
| Completion and submission of the information for **References** and **Referee Assessment** **Forms**These references are **confidential** and completed assessment forms are to be emailed directly to: research@lung.ca1. Reference #1 (Current Supervisor)

Referee Assessment Form 1. Reference # 2 (Previous Supervisor)

Referee Assessment Form | **To be sent directly by referees** |

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| **17. Submitting your registration and application:** |
| **Submit registration and application:**1. Upload one (1) electronic copy of your abstract to: <https://www.surveymonkey.com/r/2023TraineeAwards> by **April 5, 2023 by 16:00 EDT**.
2. Upload one (1) electronic copy of the application to: <https://www.surveymonkey.com/r/2023TraineeAwards> by **April 26, 2023 by 16:00 EDT**

**Application Deadline: April 26, 2023 by 16:00 EDT** |