



Department of Pediatrics
Graduate Student Recruitment Scholarship
APPLICATION FORM

Students must submit the completed application form and required attachments with signatures to the Department of Pediatrics, Graduate Education Office by email at pedscred@ualberta.ca as ONE PDF with their first and last name in the file name. The application is to be completed using a font size of 12 pt or larger. The application is due by 4 p.m. on Friday August 7, 2020.

PART 1: PERSONAL INFORMATION

A. CANDIDATE'S INFORMATION

Name: <u>Surname</u> , First Name, Initials	
Contact Information:	
Cell phone: _____	Email address: _____
UofA ID Number: _____	

B. SUPERVISOR'S INFORMATION

Proposed Supervisor: <u>Surname</u> , First Name, Initials	Supervisor Division:
Contact Information	
Office phone: _____	
Email: _____	

SIGNATURES

Signature of:	Printed Name	Date
Candidate:		
Supervisor:		
Associate Chair, Research (Interim):	Gary Lopaschuk	

C. PROGRAM INFORMATION

1. Indicate the graduate program in which you will be enrolled in 2020:

M.Sc.

Ph.D.

2. Indicate the month and year of initial registration as a graduate student: _____

D. COURSEWORK

1. List courses planned as part of your graduate program (if known):

E. CANDIDATE'S CURRENT AND COMPLETED UNIVERSITY PROGRAMS

Submit all University level transcripts. (Additional pages may be appended if necessary.)

Degree/Diploma/Specialization/Faculty	University/Institution/Country	Dates of Enrolment	
		FROM(Mo/Yr)	TO(Mo/Yr)

F. UNIVERSITY ACADEMIC ACHIEVEMENTS (Prizes, Honors, Awards)

(Additional pages may be appended if necessary.)

Prizes/Honors/Awards	Awarded By	Year Won/Held

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G. RELEVANT RESEARCH AND WORK EXPERIENCE

FROM: YR. MO.	TO: YR. MO.	Position	Institution/Company/City/Country	Supervisor's Name

H. CANDIDATE'S PUBLICATIONS (Additional pages may be appended if necessary.)

Provide a list of your scientific publications and presentations. List only papers/abstracts that have been **published** or are **in press**.

I. LETTERS OF REFERENCE

Identify the two individuals who have been asked to submit a letter of reference on your behalf. The proposed supervisor should be one of the two.

Name	Institution/Organization	Telephone Number

J. PERSONAL STATEMENT

Tell us your personal statement of interest in this program using the space provided below (do not exceed the space provided). **Additional pages will not be accepted.**

A large, empty rectangular box with a thin black border, intended for the applicant to write their personal statement. The box occupies most of the page's width and height.

PART 2: PROPOSED RESEARCH PROJECT

In the space provided below, the *supervisor* is to provide a summary of the student's research project. Use Arial 10 pt or larger. Additional pages will not be accepted. Do not exceed the space provided.

Project Title:

PART 3: SUPERVISOR'S INFORMATION

A. SUPERVISOR'S RESEARCH FUNDING

List only active and/or pending operating research grants. Do not list equipment or equipment maintenance grants, or research allowances associated with studentship or fellowship awards. If you are a co-investigator on a grant, list only the portion of the funding you will receive. (Use additional pages if necessary.)

Granting Agency	Role (PI/Co-PI)	Title of Project	Period of Support	Amount/Year
Active				
Pending				

B. SUPERVISOR'S RESEARCH PUBLICATIONS

On a separate page, list your publications for the **past 5 years**. List only papers **published or in press**.

C. SUPERVISOR'S RESEARCH TRAINEES. List all currently supervised trainees.

Surname, first name	Type of Trainee		Source of Support	Expected Completion Date of Training
	PDF	Grad Student		

D. SUPERVISOR'S RESEARCH AREA

Provide a brief description of the work carried out in the laboratory or in your research group, the facilities, and/or personnel available to the trainee, indicating the relevance to the candidate's proposed studies.