



Please indicate your name and program start date. *If you have transferred from a Master's to a PhD program without receiving a Master's degree, please indicate the start date of your Master's program.*

Graduate Program	Master's or PhD?
Student Number	Start Date (MM/YYYY)

List your undergraduate and graduate awards or scholarships received or currently holding, starting with your most recent award. You may include declined awards. One page maximum.

Award Name	Total Amount (/ Years)	Location Award was Held	Dates Held (MM/YYYY–MM/YYYY)
Example Award	105000/3yrs	UBC	09/2012 - present
Example Conference Travel Award	1000	Example Conference	04/2013



List your research or research-related experiences, starting with your most recent experience.  
One page maximum.

Research Experience	Dates (MM/YYYY – MM/YYYY)



Provide a summary of your research project or proposed research project in plain language. Note that as the review process will be blind, **you should not use gender specific pronouns or similar identifying characteristics**, including your name (list instead “The Trainee” as needed). One page maximum.

Project Title



List your publications and other contributions, beginning with your most recent publication. Note that as the review process will be blind, **you should not use gender specific pronouns or similar identifying characteristics**, including your name (list instead “The Trainee” as needed). One page maximum. Please see Instructions & FAQs for formatting guidelines.



**\*\*\*Supplementary Application Form for the Richard A. Robertson Memorial Service Award in Medicine\*\*\***

The following section should only be completed by students who are applying for the Richard A. Robertson Memorial Service Award in Medicine

Describe your extracurricular and community service activities, and any leadership roles you have held. Note that as the review process will be blind, **you should not use gender specific pronouns or similar identifying characteristics**, including your name (list instead "The Trainee" as needed). One page maximum.



*The undersigned agree that the general conditions governing all funding of these awards as set out in the enclosed guidelines apply to any award made pursuant to this application, and are hereby accepted by the applicant and the department in which the student is receiving the training.*

Note that as a part of the blind review process, this final page will be redacted from your adjudication package and is for administrative purposes only.

Student Signature	Supervisor Signature
Student Name (printed)	Supervisor Name (printed)
Date	Date