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| **Student Number** | **Degree and Graduate Program (e.g. MSc, Experimental Medicine)** |
|  |  |
| **Program Start Date (Month, Year)** | |

Main Application Form- Graduate Student Awards 2023

List your undergraduate and graduate awards or scholarships received or currently holding, starting with your most recent award. You may include declined awards (Max one page).

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

List your research or research-related experiences, starting with the most recent experience (Max one page).

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| --- | --- |
| **Research Experience** | **Date (MM/YYYY – MM/YYYY)** |
| For example:   1. Name of the position, location  * Please include your Role/ responsibilities or contribution |  |

Provide a lay summary of your current research project or proposed research project. This summary should be written for a general audience (Max one page).

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| **Title** |
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List your publications and other contributions, starting with the most recent publication as per the order indicated below. Please include percentage contribution also against each listed entry. Contributions not yet submitted should not be listed (**Max one page**).

1. Peer reviewed publications
2. Peer reviewed Journal articles
3. Conference proceedings (Talks, Posters)
4. Non-peer reviewed publications
   1. Journal articles
   2. Conference proceedings
   3. Other (Chapters, books, magazine)
5. Patents/copyrights etc.

*Please note that the review process will be blind. Kindly do not use your name, gender-specific pronouns, or similar identifying characteristics* (list instead “The Trainee” as needed).

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**\*\*\*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). (350 words max).

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*The undersigned agrees 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.

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| --- | --- |
| **Student Signature** | **Supervisor Signature** |
|  |  |
| **Student Name (printed)** | **Supervisor Name (printed)** |
|  |  |
| **Date** | **Date** |
|  |  |