

2020 RVH SUMMER STUDENT RESEARCH AWARD APPLICATION

The RVH Research Institute is committed to supporting the scholarly development of students enrolled at a Canadian university or college.

The 2020 RVH Summer Student Research Award enables qualified students to engage in an immersive summer research training experience intended to supplement and give practical meaning to their academic coursework. The objectives of the award are to stimulate interest in applied health research and to help prepare students for post-graduate studies or research-related careers.

Successful candidates will be eligible to receive up to \$4,500 Canadian dollars (CDN) for a full 16-week period (May 11-Aug. 28, 2020). The number of awards offered is conditional upon available funding. Applicants are subject to the 2020 RVH Summer Student Research Award's Terms and Conditions.

DATES AND DEADLINES

Call for Applications: **Monday, January 13, 2020**

Application Deadline: **Friday, March 13, 2020**

Award Decision: week of **Monday, April 6, 2020**

ELIGIBILITY

Please see the award's Terms and Conditions for full eligibility criteria

1. APPLICANT INFORMATION			
1. Name:			
2. Address:		3. City/Town:	4. Province:
5. Postal Code:	6. Telephone Number:	7. Email Address:	
8. Citizenship: Canadian Permanent Resident			

2. DEGREE IN PROGRESS (OR MOST RECENT COMPLETED)		
1. Institution:	2. Faculty:	3. Department:
4. Degree Type:	4. Start Date (MM-YYYY):	5. Expected Completion Date (MM-YYYY):

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3. PERSONAL STATEMENT

1. Describe in the space below your reasons for applying to the 2020 RVH Summer Student Research Award (maximum 500 words; append additional pages, if necessary)

4. RVH SUPERVISOR INFORMATION

1. Name:		2. Title(s):	
3. Position/Role:		4. Department:	
5. Address:		6. City/Town:	7. Province:
8. Postal Code:	9. Telephone Number:	10. Email Address:	

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5. RESEARCH PROPOSAL

1. Project Title:

2. Key Words (maximum 5 related to research):

3. Description of Research. Include Background, Hypothesis, Specific Aims, Methods, and References (maximum 1000 words; append additional pages or study protocol to application, if necessary):

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6. Has this research been proposed elsewhere?

Yes

No

If Yes, please specify where:

7. Is this research a continuation of an existing project?

Yes

No

8. Is the student receiving or will receive funding from other sources to conduct this research?

Yes

No

If Yes, please specify source of funding:

9. Has the student previously worked or volunteered at the Royal Victoria Regional Health Centre?

Yes

No

If Yes, please specify when and in what capacity?

10. ATTACHMENTS (attach each of the following to this application)

- ☐ Cover Letter
- ☐ Applicant Curriculum Vitae
- ☐ Applicant TCPS2: CORE Tutorial Certificate
- ☐ Transcript
- ☐ Confidential Assessment Report (note, to be sent by referee directly to RVH)

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11. ACKNOWLEDGEMENTS

I have read and understood the 2020 RVH Summer Student Research Award's Terms and Conditions.

I hereby declare that all information given on this application is true and complete in every respect.

Signature of Applicant

Date (DD-MMM-YYYY)

Signature of Supervisor

Date (DD-MMM-YYYY)

Please submit the completed application to: Kelly Cruise, BHSc, CCRP
Centre for Education and Research, Room 3355
Royal Victoria Regional Health Centre
201 Georgian Drive
Barrie, ON L4M 6M2
CruiseK@rvh.on.ca

Please note, due to the high volume of applications, only successful candidates will be contacted.
Thank you in advance for your interest in the 2020 RVH Summer Student Research Award.

RVH Research Institute Use Only				
Date Received (YYYY/MM/DD):		Application is complete: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Approved for Funding: <input type="checkbox"/> Yes <input type="checkbox"/> No		Initials of two members of the RVH Research Council:	A.	B.