SEAMO Research Fellowship Program Application Form



Application Details:

Department						
Dept Head						
Phone		Email				
Candidate		Date of completion of CCFC or RCPSC specialty training				
Position Number		Funding Requested				
Start Date		Funding From Another Source				
NOTE: By submitting this application and, when applicable, subsequently accepting an award from the Research						
	m (RFP), the Department Head agrees					
training shall not be	e less than 0.6 - 0.8 full-time equivalent	and that the	awardee	shall a	pply for external fund	ling of
his or her research fellowship in accordance with the requirements of the RFP.						
Department						
Head			Date			
Signature						

<u>Instructions</u>

Complete all pertinent sections.

Send to: seamo@queensu.ca.

Dr. Diane Lougheed c/o SEAMO Office

Chair, Clinician Scientist Program Committee

Medical Director, Southeastern Ontario Academic Medical Organization

Vice-Dean (Clinical) Faculty of Health Sciences

The application for a New Award must include the following information:

- 1) Name the research supervisor(s) and briefly describe the focus and resources of the research program within which the candidate will pursue training.
- 2) Briefly outline the candidate's program of research and how it will be supported.
- 3) Provide a summary of the candidate's previous research experience, highlighting his/her successes and accomplishments.
- 4) Provide an assessment of the research potential of the candidate, describe how the proposed research training relates to the candidate's career plan, and confirm the candidate's willingness to have a 3-year return to service.

5) The candidate's CV.

