

RHISE HBI-Melbourne Trainee Exchange: Application Form

Completed application forms and all attachments should be submitted as a single PDF file to jason.ng1@ucalgary.ca.

For full program details, including competition deadlines, please refer to the award terms of reference.

As a public body, the Hotchkiss Brain Institute (HBI) is regulated by the Freedom of Information and Protection of Privacy Act (FOIPP) of Alberta. As such, all personal data collected will be for HBI internal use ONLY and will not be communicated with anyone outside of the Institute.

A. APPLICANT DETAILS

Full Name: <i>Surname, First Name & Initial(s)</i>			
Home Institution:			
Current Position (choose one):	<input type="checkbox"/> Graduate Student – MSc <input type="checkbox"/> Graduate Student – PhD <input type="checkbox"/> Postdoctoral Fellow		
Complete Mailing Address:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Phone:</td> </tr> <tr> <td>Email:</td> </tr> </table>	Phone:	Email:
Phone:			
Email:			
Current CV and Publication List Attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No		

B. SUPERVISOR DETAILS

Supervisor Full Name: <i>Surname, First Name & Initial(s)</i>			
Name of Institution:			
Complete Mailing Address:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Phone:</td> </tr> <tr> <td>Email:</td> </tr> </table>	Phone:	Email:
Phone:			
Email:			
Current CV and Publication List attached:	<input type="checkbox"/> Yes <input type="checkbox"/> No Letter of Support for Applicant attached: <input type="checkbox"/> Yes <input type="checkbox"/> No		
<p>Notes: Current CV and publication list for a maximum period of last 5 years and not to exceed 3 pages</p> <p style="text-align: center;"><i>All letters of support must be in English, on headed paper and signed</i></p>			

C. HOST LABORATORY

Host Supervisor Full Name:

Surname, First Name & Initial(s)

Complete Mailing Address:

Phone:

Email:

Current CV and Publication List attached: Yes No Letter of Support for Applicant attached: Yes No

Notes: Current CV and publication list for a maximum period of last 5 years and not to exceed 3 pages

All letters of support must be in English, on headed paper and signed

D. PROJECT TITLE AND PROPOSED RESEARCH PROJECT

Describe the nature of your proposed research project. The objectives and working hypothesis should be clearly summarized in the space below.

E. TRAVEL AND FUNDING DETAILS

Anticipated start and end dates of visit:

*Start date (YY-MM-DD)**End date (YY-MM-DD)*

Have you applied to another granting agency for a similar award or additional funding?

Yes

No

If yes, please specify:

Expense	Proposed Costs <i>(Please attach quotes when possible)</i>
Airfare (attach quote)	\$
Ground transport	\$
Accommodation	\$
Food (\$20 per diem)	\$
Other (please detail)	\$
	\$
	\$
Total:	\$

F. DIRECT RESEARCH COSTS BUDGET

Direct Research Expense	Proposed Costs (must be included at time of application) <i>(Please attach quotes when possible)</i>
	\$
	\$
	\$
	\$
	\$
Total:	\$

G. ADDITIONAL NOTES

If applicable, include any additional notes or details for consideration below.