



## PART A: APPLICANT CHECKLIST AND SIGNATURE PAGE

See *Grants and Awards Guide* for details of this competition and the application deadline date.

Late applications (after 3pm on deadline date) will not be accepted.

A HARD COPY ONLY of this Application should be submitted to CHRIM Administration Office  
(Room 513 John Buhler Research Centre)

At the time of application, the applicant must be a student enrolled in a postsecondary educational institution or have just graduated (convocated) from an undergraduate program within the last 6 months. Applicants with prior degree(s) or diploma(s) will be considered if they are enrolled in another undergraduate program at the time of application.

It is the responsibility of the student to find a supervisor. Researcher profiles for CHRIM members are listed at [www.chrim.ca](http://www.chrim.ca). Profiles will indicate researchers who are currently accepting students.

If you have any questions about the application process, please contact the Grants Administrator ([grantsadministrator@chrim.ca](mailto:grantsadministrator@chrim.ca)).

### APPLICANT INFORMATION

|                          |  |                             |  |
|--------------------------|--|-----------------------------|--|
| <b>Last Name</b>         |  | <b>First Name</b>           |  |
| <b>Mailing Address</b>   |  |                             |  |
| <b>City and Province</b> |  | <b>Postal Code</b>          |  |
| <b>Country</b>           |  | <b>Phone (home or cell)</b> |  |
| <b>Email (permanent)</b> |  | <b>Social Insurance No.</b> |  |

Please check that the following required attachments are included with your application:

- All parts of this application, including signatures from both you and your potential supervisor
- Official university transcript of most recent marks
- Letter from your potential supervisor in child health research, in a sealed envelope
- Two (2) letters of reference, in sealed envelopes

Optional: If you wish to identify as an Aboriginal person, Status Indian/First Nations, Non-Status Indian/First Nations, Metis, or Inuit, please check this box\*.

*\*CHRIM designates specific funds for Aboriginal Undergraduate Summer Studentships and uses this self-identification internally to correctly process summer studentship applications.*

The applicant's signature below indicates that

- You have read and understood the CHRIM Grants and Awards Guide
- You agree to the terms and conditions of the Summer Studentship outlined in the Guide
- You have read and agree to the Mission, Vision and Values of CHRIM (see page 3)

|                            |             |
|----------------------------|-------------|
| <b>Applicant Signature</b> | <b>Date</b> |
|                            |             |



**PART B: SUPERVISOR CHECKLIST AND SIGNATURE PAGE**

|                           |  |                         |  |
|---------------------------|--|-------------------------|--|
| <b>Applicant Name</b>     |  |                         |  |
| <b>Project Title</b>      |  |                         |  |
| <b>Supervisor Name</b>    |  |                         |  |
| <b>Supervisor Phone #</b> |  | <b>Supervisor Email</b> |  |

Please check the applicable attachments:

Letter of support for the applicant, signed and in a sealed envelope, that includes the following elements:

- A description of the student's specific research project, specific training objectives and details of how they are to be achieved.
- A description of the relevance of this project to child health
- Description of the funds available to support this research project
- Description of regulatory approval required for this project and list of documentation attached.

If you are a member of a Theme, a letter of support from the Theme Leader should also be included.

If regulatory approval for this project is required (ethics, licensing), please attach appropriate documentation\*

*\*If a clinical intervention (medical device, pharmaceutical or biologic) is proposed, documentation that the product is licensed for this use, or approval for investigational use must be obtained, or evidence that a submission for approval for the proposed use has been made to Health Canada must be appended*

The supervisor's signature below indicates that

- You have read and understood the CHRIM Grants and Awards Guide
- You agree to the terms and conditions of the Summer Studentship outlined in the Guide
- You have research funds to cover the costs of this student's project
- You are a current Member of CHRIM in good standing

|                             |             |
|-----------------------------|-------------|
| <b>Supervisor Signature</b> | <b>Date</b> |
|                             |             |



## PART C: APPLICATION DETAILS

| EMPLOYMENT EXPERIENCE (list most recent first) |  |          |  |
|------------------------------------------------|--|----------|--|
| Employer 1 (Company or Institution)            |  |          |  |
| Job Title/Description                          |  |          |  |
| Start Date                                     |  | End Date |  |
| Employer 2 (Company or Institution)            |  |          |  |
| Job Title/Description                          |  |          |  |
| Start Date                                     |  | End Date |  |
| Employer 3 (Company or Institution)            |  |          |  |
| Job Title/Description                          |  |          |  |
| Start Date                                     |  | End Date |  |

**What do you hope to achieve during your Summer Studentship?**

### MISSION

*The mission of the Children's Hospital Research Institute of Manitoba is to improve the health of infants, children, youth, maternal health and society by creating an environment that attracts and retains the best scientists and clinicians. As a leading voice and recognized advocate for excellence in research, the development and application of treatments and cures will lead to improvements in child health.*

### VISION

*The vision of the Children's Hospital Research Institute of Manitoba is to be a leading contributor of science and knowledge through discoveries. The institute will improve the quality of life for infants, children, youth and maternal health within the community, both within Manitoba and beyond.*

### VALUES

- Knowledge, Innovation, Integrity and Involvement – of our research community.
- Strength and Effectiveness – of partnerships with the broader health care community (special attention to our partners in Manitoba)
- Dedication – as an unwavering expectation of staff at CHRIM
- Support – of donors through the Children's Hospital Foundation.
- Excellence – as a standard in child health research and care