HOTCHKISS
BRAIN INSTITUTE

ALL APPLICATIONS MUST BE SUBMITTED TO THE HBI EDUCATION DIRECTOR BY E-MAIL TO hbi.education@ucalgary.ca NO LATER THAN MIDNIGHT OF THE DEADLINE DATE INDICATED ON THE AWARD TERMS OF REFERENCE. PLEASE SUBMIT THE APPLICATION AND RELEVANT SUPPORTING DOCUMENTS AS ONE SINGLE PDF FILE. MAKE SURE TO REVIEW THE INSTRUCTION SHEET AS WELL.

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, the information on this Personal Data page will be for internal use ONLY.

Applicant Information:

Full Name:

			UCID:	
Last	*First*	*M.I.*		*(if known)*

Address:

Street Address	*Apartment/Unit #*

City	*Prov/State*	*Country*	*Postal/Zip Code*

Phone: Email:

Competition applying for: ☐ Graduate Student - MSc   ☐ Graduate Student - PhD

Award Section:

Please select all the award(s) you wish you apply for:

☐ HBI Graduate Scholarship in Neurosciences (MSc/PhD)	☐ Harley N. Hotchkiss Doctoral Scholarship in Neurosciences (PhD)
☐ Spinal Cord, Nerve Injury & Pain (SCNIP) Graduate Award (MSc/PhD)	☐ HBI International Graduate Recruitment Scholarship (MSc/PhD)
☐ Donald Burns & Louise Berlin Graduate Awards in Dementia Award (MSc/PhD)	☐ CaPRI Graduate Student Award (MSc/PhD)
☐ T. Boone Pickens Emerging Leaders Graduate Scholarship (MSc/PhD)	☐ Open Science Student Award (MSc/PhD)

Graduate Applicant Information:

A. Graduate Program:

Actual or anticipated start date of training program (YYYY/MM):	
Anticipated completion date of training program (YYYY/MM):	
Program/Faculty registered in:	
Proposed start date for award (YYYY/MM/DD):	

B. Applicant's Accomplishments

Append an outline to this page of your relevant academic, leadership, work and/or research accomplishments and/or experiences that you have accomplished to date. Contributions described in this section may include academic, non-

academic and research achievements. Provide background information on major scholarships or award and their significance. Publications are to be listed on a separate page (please see instructions). Do not exceed one typed page.

Outline of relevant accomplishments/experiences attached:	☐ Yes	☐ No
Publication list attached:	☐ Yes	☐ No

Supervisor Information

Primary Supervisor name:	
Co-Supervisor name (if applicable):	

ATTACH SUPERVISOR(S) CCV at end of application (CIHR Project Biosketch CCV preferred).

PARTICIPATION OF SUPERVISOR IN EDUCATIONAL ACTIVITIES OF THE HBI (to be completed by supervisor)

Outline participation in HBI-related educational activities over the last 5 years, including student committee involvement, teaching/seminar activities, committee work relative to the educational mandate of the HBI, etc.

Research Project

Project Title

Lay Abstract and Research Project Summary:
Please make sure to include a lay abstract and research project summary in the attachment. The lay abstract shall not exceed half a page in length, and the research project summary shall not exceed one full page.

Other information:

Does your project involve:	Use of Animals	☐ Yes	☐ No
	Human Subjects	☐ Yes	☐ No
	Biohazards	☐ Yes	☐ No
Have you applied to another granting agency for a similar award?		☐ Yes	☐ No
If yes, please identify the agency:			

Are sex (biological) or gender (socio-economical) considerations taken into account in this proposal? If so, please describe how these will be incorporated into the experimental design. (1/2 page)

For specific awards (Optional)

For Spinal Cord, Nerve Injury & Pain (SCNIP) applicants only: Describe how your research project falls within the mandate of the SCNIP Team on a separate sheet (half a page limit)

For CaPRI Graduate Student Award applicants only: Please describe in the space provided how this project relates to Parkinson's Disease and Related Movement Disorders (half a page limit)

For Open Science Fellowship applicants only: Please describe in the space provided how this project relates to the HBI Open Science mission (half a page limit)

Letters of Reference

All applications are required to identify 2 individuals who can submit a letter of reference. We recommend that one of the two be the current/propose supervisor. Note that incoming students/PDFs may prefer to provide reference letters from individuals who can speak more directly to their abilities.

Name	Institution/Organization	Email Address

All letters should be submitted by e-mail directly to hbi.education@ucalgary.ca by the stipulated deadline date.

Disclaimer and Signature

I agree to and accept the general condition governing any award made pursuant to the scholarship of this application as set out in the guidelines available for the above listed scholarship awards. In addition, the undersigned also agrees to adhere to the principles of Open Science supported by the HBI.

Signature of:	Printed Name	Date
Applicant		
Supervisor*		
Co-Supervisor (if applicable)*		

*By signing this application, supervisors agree to the terms for each award and confirm their matching support to maintain the guaranteed total funding as stipulated in the terms of reference for the duration of the award. As well, Supervisors and/or Co-Supervisors agree to be available to review and score applications on the studentship and Postdoctoral Award Committees, so long as you are free of any conflict of interests.

HBI Scholarship awards are governed by the Graduate Award Regulation and the Cumming School of Medicine Funding Policy, as such, trainees and supervisors are strangle advised to be aware of the guidelines within the policy upon application to HBI scholarship award competitions.