**ALAN ROSS ACADEMIC BURSARY AWARD**

**Form B - to be completed by Research Project Supervisor and Program Director**

**IMPORTANT:**

* Please send this completed form to Sally Crawford (peds.admin@muhc.mcgill.ca) **by
September 15th**.
* Applicant must be eligible for, and apply to postgraduate training online through the Postgraduate Medical Education website: <http://www.mcgill.ca/pgme/admissions>. Program Directors should ensure that the applicant has completed this step **by September 1st**.
* Prior to being put forth as an applicant for the bursary award, McGill eligible applicants must be evaluated and deemed acceptable by the Research Supervisor and Program Director (through interviews and review of application)
* The office of the Chair (through the Administrative and Student Affairs Coordinator) will notify the Program Director and the Postgraduate Medical Education Office whether the applicant was successful through the bursary award competition.
* The final offer to the candidate to train in a postgraduate medical program at McGill University is made through the Postgraduate Medical Education office of the Faculty of Medicine, once all postgraduate requirements have been met.

## General Information

|  |  |  |
| --- | --- | --- |
| Applicant Name:  |  |  |
|  | Last | First |

|  |  |
| --- | --- |
| Program: |  |

|  |  |
| --- | --- |
| Program Director: |  |

|  |  |
| --- | --- |
| Research Supervisor: |  |

*(if different from the Program Director)*

|  |  |  |
| --- | --- | --- |
| Training Period:  | 1 Year[ ]  | 2 Years[ ]  |

## 2. Proposed Training Program Outline

**a) Research Component (minimum 70%):**

Please provide a detailed description of the components of the proposed research training program, including resources and infra-structure available to the applicant. **(MAXIMUM 500 words)**

**b) Clinical component (maximum 30%):**

Please provide a detailed description of the proposed clinical component of training. Include a proposed weekly, monthly, or annual schedule, as well as provisions for on call responsibilities for the applicant. **(MAXIMUM 500 words)**

## 3. Research Environment

**a)** Research Supervisor’s financial or grant support to conduct the proposed research of the applicant. **(MAXIMUM 300 words)**

**b)** Space and resources (office, lab, computer, statistical support, etc.) for the applicant.
**(MAXIMUM 300 words)**

## 4. Additional Required Documents

Please attach the following documents to the end of the Form B:

a) Research Supervisor’s abbreviated CV

b) Recommendation letters by

1. **Research Supervisor**

In the letters, please include:

* + Reasons why the applicant should be awarded the Alan Ross bursary
	+ A statement of his/her commitment to the applicant’s research training and to the completion of the proposed project
	+ Other items can be added to the recommendation letter to the discretion of the research supervisor
1. **Program Director** (if PD will not be the applicant’s research supervisor)

In the letters, please include:

* + An explanation of how the candidate has been evaluated and selected by your program/program committee
	+ A statement that the applicant would be acceptable to the program should they be successful with the bursary award competition
	+ Other items can be added to the recommendation letter to the discretion of the program director

|  |  |  |  |
| --- | --- | --- | --- |
| Program Director Signature: |  | Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Research Supervisor Signature: |  | Date: |  |

*(if different from Program Director)*