

2018 B.C. CANCER RESEARCH STUDENTSHIPS NOTICE and APPLICATION FORM

Summer research studentships will be available to support senior undergraduate university students and/or junior medical or dental students seeking hands-on training in cancer research in British Columbia during the period of May 1 - August 31, 2018. These summer studentships may address any discipline of cancer research including clinical, translational, basic, behavioural and population research areas. These awards may be held at any BC Cancer site of operation in the province but are restricted to applicants planning to work on a research project that is funded and supervised by a senior health professional that has a Research or Faculty appointment with BC Cancer.

1. ELIGIBILITY

- ❖ Only 3rd to 5th Year (at time of application) Undergraduate university students and 1st & 2nd Year (at time of application) Medical or Dental students who have not previously received a B.C. Cancer Studentship are eligible.
- ❖ Preference will be given to students who are residents of British Columbia or who may be from out of province but are full-time students at a university in British Columbia.
- ❖ Students already enrolled in a graduate program at the time of tenure of the award are NOT eligible.
- ❖ Students who have already been awarded a higher degree are NOT eligible.
- ❖ Medical Students participating in a clinical rotation are NOT eligible
- ❖ To be eligible as a supervisor, the individual must hold either an active research grant or other form of peer-reviewed research funding and have a research or faculty appointment with BC Cancer. Only one applicant per supervisor may be submitted.
- ❖ Note: Research experience and potential are major selection criteria for these awards.

2. TIME FRAME

Studentships are tenable for a period of 16 weeks. The studentships will pay \$375 per week to a maximum of \$6,000. The base amount and duration of the award can be supplemented by the supervisor at his/her discretion. However, these awards will expect that recipients will be full-time in their role as summer students and they will not hold other jobs or positions that compete with their research time.

3. SUBMISSION OF APPLICATIONS

A completed application form and all requested supporting documents **must be emailed as a single PDF and submitted by the deadline date.** The application must be signed by both the student and the supervisor. **Only ONE application per supervisor may be submitted.** A complete application will include:

- i) A completed and signed application form (**Times New Roman no smaller than Font 11**). Hand-written forms will not be accepted. Completed applications should be emailed to cclugston@bccancer.bc.ca.
- ii) All questions must be answered. Use only the space provided on the form.
- iii) **Transcripts from all post-secondary institutions attended must be included in the PDF application.**
- iv) **In addition, two (2) original letters of reference**, from different individuals must be supplied. Your referees must be familiar with your academic and/or professional abilities. Personal references from family or friends will not be accepted. NOTE: A letter from the proposed supervisor will be accepted but will not be considered as one of the 2 requisite letters of reference. ***Electronically signed reference letters should be forwarded as emailed PDFs directly to cclugston@bccancer.bc.ca by the referee and must be received by the deadline date.***
- v) The committee requires that a brief written report be submitted at the end of the summer project to evaluate the effectiveness of the studentship program. This may be prepared jointly by the recipient and the supervisor.

4. **APPLICATION DEADLINE: MONDAY, MARCH 12th, 2018**

Complete applications must be received by the deadline date. Incomplete applications or applications received after the noted deadline ***will not be considered.***

BRITISH COLUMBIA CANCER RESEARCH STUDENTSHIPS

2018 APPLICATION FORM

(APPLICATION MUST BE TYPED (no smaller than size 11 font). USE ONLY THE SPACE PROVIDED ON THIS FORM)

1.	NAME:		TELEPHONE:		
	CURRENT MAILING ADDRESS:				
			POSTAL CODE:		
	PERMANENT BRITISH COLUMBIA ADDRESS:			TELEPHONE:	
				POSTAL CODE:	
	EMAIL ADDRESS:			DATE OF BIRTH	

2.	INSTITUTION BEING ATTENDED:									
	UNDERGRADUATE STUDENTS:									
	What year of study are you in?									
	Have you applied for or are you planning to apply for graduate studies in the next year?						YES		NO	
	Have you applied for or are you planning to apply for medical studies?						YES		NO	
	If not, what are your future academic plans?									
	MEDICAL STUDENTS:									
What year of study are you in?										

3.	OTHER DEGREES OR TRAINING ALREADY COMPLETED, IF ANY:								

4.	INSTITUTION WHERE STUDENTSHIP WILL TAKE PLACE:									
	Supervisor:									
	Department:									
	Address:									
							POSTAL CODE			
	Email address:									
	Supervisor's Telephone #:									
	TERM START DATE:					END DATE:				

5.	DESCRIPTION OF PROPOSED RESEARCH PROJECT:	
	<i>Please describe the research project under the following headings, in language understandable both to lay persons and scientists: Use only the space provided on this form for these questions.</i>	
	a)	Supervisor's research area
b)	Title of Research Project	
c)	Summary of the project in non-scientific language	
d)	Scientific summary of research project including rationale, primary objectives and experimental plan feasible for the studentship term. (One page limit: Times New Roman, font 11- insert as a separate page). Advise that projects be written jointly by the supervisor and the student.	
e)	What are the student's specific responsibilities and research activities?	
f)	What are the student's learning objectives? (must be written by supervisor)	

5.	g)	What are the benefits to the student? (must be written by supervisor)

6.	What are your motivations for pursuing this studentship? (must be written by the student)

7.	What are your future plans in cancer research? (must be written by the student)

8.	Describe the research environment of host laboratory

9.	ADDITIONAL RELEVANT INFORMATION	
	a)	<p>List any prizes, scholarships or other honours you have been awarded</p>
	b)	<p>If you have a list of publications and/or presentations, please insert as a separate page.</p>
	c)	<p>Previous research, elective or other experience, including previous studentships</p>
	d)	<p>To avoid possible conflicts, please list other sources of funds for which you have applied for this period (i.e. UBC, NSERC)</p>
	e)	<p>Any other information that you believe may be useful to the committee</p>

10.		List your academic referees who will be submitting your reference letters below. Please include their name, title and your relationship to them.

I understand that if my application is successful, and I accept this Studentship, I will not accept a scholarship, bursary, studentship, etc. from any other source for the period covered by this studentship, AND my name, contact information, and project details may be made available to studentship sponsors for publicity and reporting purposes. I also understand that this support is for a full-time position and I will not seek other employment for the period covered by this award.

Date: _____

Signature: _____

11.	THE FOLLOWING STATEMENT IS TO BE COMPLETED BY THE PROPOSED SUPERVISOR			
	<i>I have discussed the above program with the applicant and I am prepared to accommodate the individual and to supervise his/her work if a studentship is awarded.</i>			
	Name:			
	Title:			
	Department:			
	Telephone:	Office:	Lab:	
	Fax Number:	E-mail Address:		
	Address:			
		Postal Code:		
Current Grant Support:				
University Appointment:				
Signature of Supervisor:				
Date:				

DEADLINE FOR APPLICATIONS: MONDAY, MARCH 12th, 2018

PLEASE NOTE: INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED.