

Alberta Innovates Postdoctoral Fellowships Application coversheet

Please submit the completed form and all supporting materials **as a single pdf** to <u>oris@uleth.ca</u> by December 12 for consideration. Late or incomplete submissions will not be considered.

APPLICANT						
U of L ID (if applicable)	Applicant Name			Email address		
Canadian Citizenship Status				If other, please list your country of citizenship		
Canadian Other						
ACADEMIC BACKGROU	JND. Pleas	se include only current and	past degree p	rograms		
Name of Institution		Degree Program	Start date (MM/YYYY)	End Date (MM/YYYY)	Location	Degree conferred (yes/no)
PROPOSED PROJECT		•	•			
Project Title						
Faculty/School			Department			
Supervisor			Supervisor's email			
Co-supervisor (if applicable)			Co-supervisor's email (if applicable)			
Proposed postdoctoral appointment term at the U of L			Do you currently hold an award that provides a stipend for postdoctoral studies?			
Start Date (MM/Y	YYY)	End date (MM/YYYY)	No If yes, name of award:			

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	to which your project most closely alig	ns.					
Priority 1: Digital & Data-Enabled (D&DE) Health Research Priority 2: Advancing D&DE Tools and Methods Priority 3: Health Technology Acceleration Priority 4: Technology & Data-Enabled Health System Transformation							
OTHER AWARDS APPLIED FOR							
Have you applied/do you	plan to apply for other postdoctoral fe	ellowships from Alberta Innovates?					
Yes No	If yes, please list.						
	plan to apply for other postdoctoral fe octoral Fellowship programs?	ellowships from Banting/CIHR/NSERC/SSHRC Postdoctoral Fellowship					
Yes No	If yes, please list.						
SUPPORTING MATERIAL Attach the following mate in the application package	erials in the order listed AFTER this forr	m to complete the application. Please check to confirm they are included					
Project Proposal							
Summary of career goals							
Supervisor statement of support							
Applicant CV	Applicant CV						
3 letters of reference sent directly to oris@uleth.ca by referees							
APPLICANT DECLARATION							
	- •	with Alberta Innovates about my application. This may include sharing e results of internal review processes conducted by the University of					
I declare that, to the bes has been withheld.	t of my knowledge, the information pr	ovided in this application and attachments is true and that no material					
Applicant signature		Date					

PROJECT ELIGIBILITY CRITERIA

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