**MARATHON OF HOPE CANCER CENTRES NETWORK CLINICIAN SCIENTIST AWARD**

**CURRICULUM VITAE**

*(Use 11 pt font, single spacing, half-inch margins throughout)*

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| --- | --- |
| **FULL NAME:** | |
| POSITION TITLE: | |
| INSTITUTION: | |
| FULL ADDRESS: | |
| TELEPHONE: | EMAIL: |
| WEB-ADDRESS: |  |
| CITIZENSHIP (WITH IMMIGRATION STATUS FOR NON-CANADIAN CITIZENS): | |

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| --- | --- | --- | --- |
| **CLINICAL AND ACADEMIC BACKGROUND** | | | |
| *Degree* | *MM/YY* | *Discipline/Field/Specialty* | *Institution & Country* |
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| --- | --- |
| **PROFESSIONAL QUALIFICATIONS, CERTIFICATIONS, MEMBERSHIPS AND LICENSES** | |
| *Date* | *Qualification, Certification, Membership or License and Authorizing Body* |
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| --- | --- | --- | --- |
| **WORK EXPERIENCE** | | | |
| *Position, Organization* | *Department/Division* | *Start Date* | *End Date* |
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| **FIRST FACULTY APPOINTMENT AT ELIGIBLE CANADIAN HOSPITAL / ACADEMIC HEALTH SCIENCES CENTRE[[1]](#footnote-12500)** | | | |
| *Position, Organization* | *Department/Division* | *Start Date* | *End Date* |
|  |  |  |  |

*[expand tables as required]*

1. **Personal Statement *(max one page)***

*Briefly describe why your experience and qualifications make you particularly well-suited for your role in the application.*

1. **Selected Research and Clinical Contributions *(max four pages)***

*In this section provide your most significant contributions to research and to healthcare (case studies, clinical trials, peer-reviewed articles, reports, books, intellectual property, products, services, trainees and other forms of research / clinical output).*

1. **Honours & Awards**

*List any honours and personal awards in chronological order.*

1. **Overview & Details of Scientific and Clinical Research Support**

*Provide an overview of your current areas of research focus including supports of your research / laboratory (max one page). Include a list of the current and pending research support (grants and contracts) from all sources. For each research support, clearly describe the main objective and provide a brief outline of the methodology and budget details including staff requirements. Explain any relationship, difference or overlap (scope or financial) between this application and all other research support (current or pending) held by the applicant. If applicable, explain any perceived duplication in funding or how this application complements research funded by other sources.*

***Current Research Support***

*Funding Source & Program Name:*

*Project Title:*

*Total Award:*

*Total Award to You:*

*Start Date:*

*End Date:*

*Main Objective:*

*Outline of Methodology:*

*Budget Details:*

*Personnel Details:*

*Relationship to the application:*

***Pending Research Support***

*Funding Source & Program Name:*

*Project Title:*

*Total Award:*

*Total Award to You:*

*Proposed Start Date:*

*End Date:*

*Main Objective:*

*Outline of Methodology:*

*Budget Request:*

*Personnel Request:*

*Relationship to the application:*

1. **List of Publications**

*Provide a full list of all your clinical/scientific abstracts and publications.*

1. The candidate must be within the first five calendar years of their first faculty appointment at an eligible Canadian hospital or academic health sciences centre. Interruptions in your work such as parental leave will be taken into account when determining eligibility. Applicants are advised to clearly and fully describe any interruptions or delays that affected the continuity of their work in the "Work Experience" section and may address it briefly in the "Personal Statment" section of the TFRI CV. [↑](#footnote-ref-12500)