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| **NMIN *Undergraduate Studentship in NanoMedicines Research***  **2023 APPLICATION FORM** |

# Program Goal: To foster interest in nanomedicines research, enable undergraduate students to join the Network, and to motivate them to continue to pursue studies in nanomedicine sciences at the graduate level and in their future careers.

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| 1. **Supervisor Details** | | | |
| Supervisor name: |  | | |
| Title: |  | | |
| Department: |  | Email: |  |
| Institution: |  | Phone: |  |
| Have you signed the NMIN *NCE* [*Network Agreement*](https://www.nce-rce.gc.ca/_docs/networks/nceagreement-ententerce_eng.pdf)? | | Yes (*eligible to apply*)  No (*not eligible to apply*) | |
| Start date of the proposed Studentship: | |  | |
| Duration of the proposed Studentship: | |  | |
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| 1. **Undergraduate Student Details** | | | |
| Undergraduate name: |  | | |
| Undergraduate program: |  | | |
| Institution: |  | Email: |  |
| Year of study most recently completed: |  | Phone: |  |
| Have you previously worked in the proposed Supervisor’s lab? | | |  |
| *If applicable,* indicate how you self-identify with an underrepresented group: | | |  |
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1. **Project Description** (to be completed by the Supervisor)

Describe the proposed research project (maximum one page excluding references, in 11pt Arial)

1. **Learning Opportunities** (to be completed by the Supervisor)

Describe the learning opportunities to be provided to the trainee, including the broader training environment and capacity-building goals (maximum one page, in 11pt Arial)

1. **Career Development** (to be completed by the Supervisor)

Describe how the NMIN *Undergraduate Studentship in NanoMedicines Research* will contribute to the student’s career development as a result of the training opportunity to be provided (maximum one page, in 11pt Arial)

1. **Rationale** (to be completed by the Undergraduate Student)

Describe the rationale/motivation underlying your interest in conducting this research, and the learning opportunities you will benefit from (maximum one page, in 11pt Arial)

| 1. **Disclaimer and Signature – Supervisor** | |
| --- | --- |
| I hereby understand and agree that any award made as a result of this application will be subject to the NMIN terms and conditions governing this award, including advertising of the award by NMIN. | |
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| Signature of Supervisor | Date |
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| 1. **Disclaimer and Signatures – Undergraduate Student** | |
| I hereby understand and agree that any award made as a result of this application will be subject to the NMIN terms and conditions governing this award, including advertising of the award by NMIN. | |
|  |  |
| Signature of Undergraduate Student | Date |
|  | |

Submit completed application packages to Divya Rao, HQP Program and Network Events Manager, at [divyarao@nanomedicines.ca](mailto:divyarao@nanomedicines.ca). Only electronic applications will be accepted.

*Issued 4 July 2023*