

COLE FOUNDATION FELLOWSHIP COMPETITION *(in clinical, translational and fundamental research in pediatric and young adult leukemia and lymphoma)*

Surname	Given Names	University I.D.

Contact Info		Mailing Address
Home Phone		
Lab Phone		
Email		

Category of bursary requested

<input type="checkbox"/> Doctoral Fellowship (see N.B. pg 8) Number of years at this level _____	<input type="checkbox"/> Post-Doctoral Fellowship Years at this level _____	<input type="checkbox"/> Clinical Fellowship Years at this level _____
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Descriptors
Provide up to 5 keywords, separated by a comma, to describe this research project.

Project Title

Primary Supervisor	Surname	Given Names	Department
Secondary Supervisor (if applicable)	Surname	Given Names	Department

Supervisor Contact Info		Mailing Address
Phone		
Fax		
Email		

Signatures

Applicant		Primary Supervisor and Secondary Supervisor (if applicable)		Department Chair	
Name		Name		Name	
Date		Date		Date	
dd/mm/yyyy		dd/mm/yyyy		dd/mm/yyyy	

Lay Summary

Non-technical summary of the applicant's research, written in simple and clear language suitable for non-experts.
(Maximum 25 lines)

Source and Amount of Funding

Indicate below funding sources and the amounts applied to that are tenable in 2025-2027

Canadian Institutes of Health Research	Amount _____	NO <input type="checkbox"/>	If no, please explain _____
Fonds de recherche du Québec - Santé	Amount _____	NO <input type="checkbox"/>	If no, please explain _____
Other external funding sources	Amount _____	NO <input type="checkbox"/>	If yes, please specify organization names and competition dates _____
Other internal funding sources (University or Hospital)	Amount _____	NO <input type="checkbox"/>	If yes, please specify organization names and competition dates _____
Are you presently holding a bursary? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If Yes, please explain. _____			
Agency	Amount	Start Date	End Date

University Education

List degrees and diplomas starting with the most recent.

mm/yyyy mm/yyyy

Degree	Institute/Country	Department	Supervisor	Start Date	End Date

Research Training

List postdoctoral & post health professional training, undergraduate & graduate research training experience.

mm/yyyy mm/yyyy

Institute/Country	Department	Supervisor	Start Date	End Date

Honors and Awards

Starting with the most recent list honors and awards, including salary and training awards received.

One additional page may be added.

mm/yyyy

Type	Awarding Organization	Amount	Date

Publications & Presentations

Indicate the total number of publications in each category.

	Published/in press	Submitted
Refereed Papers		
Book Chapters		
Abstracts & Presentation		

As an attachment, list the publications in each of the categories listed above. For each publication, list full authorship as it appears in the original publication, year, title, name and volume of the publication and the first and last page numbers. For publications in press, attach a copy of the letter of acceptance. For publications submitted, indicate to which journal and attach a copy of the covering letter.

Patents and Copyrights

Provide title and brief description, patent/copyright number, date and country(ies) of issue and name(s) of joint inventor(s).

Interruption(s) in Scientific Career

Please specify.

Type of Research Project – Please indicate below the type of research to be performed.

Clinical: _____

Translational: _____

Fundamental: _____

Other: _____ Describe: _____

Summary of Research Project – This section is to be completed in consultation with applicant's supervisor/s. Descriptive summary of the research project including: background information and rationale for the work; hypothesis; specific aims; scientific approach and expected outcomes. This section is to be written in simple non-technical language. (Maximum 2 pages, 50 lines per page)

Research Path – Describe your research activities since you received your most recent diploma and the general objectives of your research activities since that time. (Maximum 50 lines)

Relevance of Research – Explain the relevance of the research to the mandate of the Cole Foundation; which is, "...to promote research in pre-leukemia/lymphoma, leukemia/lymphoma and other related conditions/diseases in children and young adults as well as the development of clinical care for patients affected by these diseases."
(Maximum 10 lines)

Impact/Deliverables – Describe how your research will impact the treatment of pediatric/young adult leukemia, lymphoma and related diseases and, if applicable, what deliverables your research may generate. (Maximum 10 lines)

N.B. If you are applying for a PhD Fellowship, please include an official copy of your academic transcripts (university and later) **in PDF format only** with this application. If your transcript is not in this format, transcribe it into PDF format and have it verified and validated by your supervisor.