
Secondary School Health Research Bursary Awards Mentor Application

Please submit your electronic application to the office of Research Administration via e-mail, bursary@hhsc.ca, by **4:00pm on March 15, 2024**

◆ **Use tab key to move from field to field**

Name of Mentor: Professional Credentials:

E-mail Address: If Other, please specify:

Are you a member of an under-represented group?

*Under-represented group include women, persons with disabilities, Indigenous Peoples, racialized minorities, the LGBTQ+ community

Administrative Assistant: E-Mail Address

Research Specialty:
(eg. cardiovascular, cancer, mental health, pediatrics, GI)

Type of Research: Lab Based Clinical Setting **If clinical setting, submit [Request for Essential Staff](#)**

Location(s) of Placement: (e.g. DBCVSRI- level 4, MUMC-3F, HGH-CCU) **List all areas student will work in**

Site:	Area:	Room Number:
Site:	Area:	Room Number:
Site:	Area:	Room Number:

Summary of Mentorship Experience: (max 150 words)

Name of Preceptor/Supervisor:

E-mail Address: Phone number:

Student Schedule

Provide student work schedule during placement for both on-site and off-site activities. Indicate work days, hours (8am-4pm)

Note: 3-4 day onsite schedule is greatly encourage to provide greatest experience for student.

On-Site Schedule -3-4 days

Off-Site Schedule – working remote 1-2 days

Week Days:

Week Days:

Hours:

Hours:

SUMMARY OF RESEARCH PROJECT

Objectives (max 100 words)

Hypothesis (max 200 words)

Research Plan (max 1000 words)

Role of Student in Project (max 250 words)

Include skills sets/techniques, training the student will acquire to fulfill their role/position as a member of the research team during their placement.
