

Application for the Owerko Centre Trainee and Community Partnership Award

Applications should be submitted no later than 11:59 PM on Tuesday, March 15, 2022. Please submit the application and supporting documents as one single PDF file to the following email address: owerko.centre@ucalgary.ca

If you have any questions regarding the application, please contact Mark Agius at mark.agius1@ucalgary.ca

Note: Please read the award description and evaluation criteria for specific award application considerations.

SUPERVISOR: PERSONAL INFORMATION	
Supervisor's name	Department
Institute membership (please specify full membership of additional institutes)	Telephone Email address

APPLICANT: PERSONAL INFORMATION	
Applicant's name	Present address
Telephone	Email address
Current degree program and discipline	Current level of study <input type="checkbox"/> Master's <input type="checkbox"/> PhD <input type="checkbox"/> Post-Doctoral

APPLICANT: PROPOSED COMMUNITY PARTNERSHIP
Partnership title:

Proposed partnership description:

Provide a single page describing the community experience, its relationship to the trainee's research project and career goals, and the potential benefit for the community partner, including proposed time commitments and timelines.

Please note:

- **The description must be written by the applicant in collaboration with the community partner**
- **The budget should be attached as a separate 1 page document**
- **Maximum length of one page with 12pt font and .75 margins**
- **Single spaced**
- **Applications will be reviewed by a multi-disciplinary panel so please ensure that the project description can be understood by a non-specialist reviewer**

COMMUNITY PARTNER STATEMENT

My signature below indicates that: a) I have ability within my organization to approve of the trainee involvement or project as outlined in the attached proposal; b) I have read and agree with the proposal, goals, and timeline.

Signature	Contact
	Email:
	Phone number:
Name of Organization	Role in Organization

SUPERVISOR STATEMENT

My signature below indicates that: a) I fully support my trainee's application; b) I agree that this training program and opportunity will enhance my trainee's and my research program; c) I agree that the budget submitted is accurate and reasonable.

Signature	Institution/Organization	Email address