



CIHR IRSC

## B: CIHR Fellowship Awards - Issues for CIHR Attention

<b>Name of candidate:</b>
<b>Application number:</b>
<b>Reviewer:</b>

Indicate on this form any issues for CIHR staff to address regarding the application. Please note that your signature is required at the bottom of the form.

**Program Eligibility**

Provide details:

**Term of Support**

Provide details:

**Ethical Issues**

Provide details:

**Human Stem Cell Research**

Provide details:

**Other**

Provide details:

<b>Signature</b>	<b>Date</b>
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Please enclose this form with your review and send to CIHR via fax: (613) 954-1800, email: fellowships@cihr-irsc.gc.ca or mail: Fellowships

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