



APPLICANT CONSENT FORM FOR USE AND DISCLOSURE OF PERSONAL INFORMATION PROVIDED TO CIHR FOR PEER REVIEW

IMPORTANT: One original signed copy of the Applicant Consent Form is required at both the registration and application stages.

The Access to Information Act (ATI) gives Canadian citizens and Permanent Residents of Canada a limited right of access to information in federal government records. The Privacy Act gives Canadian citizens and permanent residents of Canada access to information about themselves and specifies the uses to which personal information can be put. The Privacy Act sets out the rules and conditions governing the collection, retention and disposal of personal information. It also provides a use and disclosure code for the protection of this information. This code stipulates the criteria under which information can be disclosed, including for what purposes and to whom it may be disclosed. All information collected by CIHR is subject to these laws.

CIHR seeks your certification that you have been informed that all the information supplied in the application will be made available to CIHR personnel responsible for managing the peer review process to review applications, to administer and monitor grants and awards, to compile statistics and to promote health research in Canada.

Information supplied in the application **except the pages labelled “for Administrative use only”** will be made available to Peer Review Committees composed of experts recruited from the academic, public and private sectors. Applications may also be transmitted to external reviewers.

CONSENT

(1) **OBSERVERS:** Information supplied in the application **except the pages labelled “for Administrative use only”** will be made available, with your consent to:

Observers of peer review committees. Observers requiring consent (not including CIHR staff responsible for the administration and evaluation of funding programs and members of the Standing Committee responsible for overseeing the peer review process) are:

- a) Funding Partner and / or Potential Funding Partner representatives who have no funding decision authority;
- b) Institute Staff who are not in conflict of interest and who have no funding decision authority.

I do do not consent to the sharing of the information specified above in section (1) with the observers described.

(2) **RELEVANCE REVIEW:** For use in determining an application’s relevance in accordance with the Institute’s / Partner’s / Branch’s mandate, or the application’s relevance to the research areas as identified within a priority announcement, the **Project Title, Project Summary and / or Relevance Form** already available to CIHR staff responsible for the administration of funding programs may also be provided to:

- Institute Staff managing research envelopes and Institute Advisory Board Members;
- Funding Partners and / or Potential Funding Partners;
- CIHR Senior Managers who manage research envelopes and sponsor Strategic Initiatives.

(3) **FUNDING DECISIONS:** For use in making funding decisions after Peer Review, the **Rating, Rank, Committee Recommendations on Budget and Term** will be made available, upon your consent to:

- Institute Staff and Institute Advisory Board Members;
- Funding Partners and /or Potential Funding Partners;
- CIHR Senior Managers who manage research envelopes and sponsor Strategic Initiatives.

I do do not consent to the sharing of the information specified above in sections (2) and (3) with the groups described.

I, the undersigned, do hereby give CONSENT to the use and disclosure of the information contained in my application for the purposes as herein described. This consent extends only to those specific areas where I have indicated this consent. I also understand that I may withdraw my consent at any time and that it will become effective upon its receipt by CIHR.

| Name | Signature | Date |
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- 1) **Keep a copy for yourself**
- 2) **Send the original, signed form with your application**