

This information is collected under the authority of the Ministry of Health Act, R.S.O. 1990, c.M. 26, s. 6(1) and (2), to determine the applicant's eligibility for a research grant. For information please contact Manager, Research Unit, Ministry of Health and Long-Term Care, 1075 Bay Street, Suite 300, Toronto ON M5S 2X4. Tel. (416) 327-4420.

Ontario universities may submit applications on behalf of individuals. Applications may be submitted in either English or French. **Please submit this form electronically by email to [ResearchUnit@ontario.ca](mailto:ResearchUnit@ontario.ca).** One hard copy with original signatures on the cover sheet must be mailed to Research Unit, 1075 Bay Street, Suite 300, Toronto ON M5S 2X4. Sufficient time should be allowed for processing within the university to obtain the appropriate authorization in advance of the application's deadline.

Applications which do not include the requested information will be deemed incomplete and therefore ineligible. Letters of recommendation from academic and decision-maker mentors must be submitted directly to the Research Unit.

## Section A - Cover Sheet

### Personal Information

Candidate's Name

Mailing Address: (Apt/Suite No.), Street number, Street name

City Province Postal Code

Telephone (business)

Telephone (residence)

Eligible to work in Canada  Yes  No

### Current Status

**Check all that apply. Specify program/position**

Employed

Appointment to established university position

Other (specify)

### Current Application

Planned start date of this award

Termination date

Title of proposed research program

Have you applied for other support? If 'Yes' specify agency and date of application

No  Yes

Do you have any ministry data access needs for your research program?

No  Yes

### Candidate's Signature

Date

### Sponsoring Institution Information

Name of University

Department

Address

Department head	Name	Signature	Date
Dean of faculty	Name	Signature	Date
Decision-Making Mentor	Name	Signature	Date

**Section B - Candidate's Statement***(to be completed by Candidate)*

**This section should be completed by the individual candidate (maximum 10 single-spaced pages).**

- a description of current status detailing research, teaching (including graduate student supervision), and service activities, indicating time spent and level of involvement;
- a description of the current research proposal, or proposals for which the candidate has received (or applied for) grants as a principal investigator, or proposed research the applicant will undertake during the first year of the award. Projects should be described in sufficient detail, without relying on the appendices, so that the quality can be assessed. In addition, a five-year outline of research direction and intentions (actual proposals may be included in the appendices, up to the limit specified) should be included. The five-year plan should include sufficient content for the coherence of the research program to be evaluated. If this includes collaborative research with other health disciplines, then explicit details should be provided of the specific contribution of the candidate to a team effort;
- a brief description of any ministry data access required for their research program and provide a brief description of the data requirements at the time of submitting the application.
- a description of plans to establish linkages with decision-makers in addition to the decision-maker mentor and participate in knowledge transfer as described under ELIGIBILITY CRITERIA; and
- a short "Plain Language Statement" of less than 100 words which is easily understood by the lay reader (if technical terms and names are unavoidable, please define them as they first appear). Describe the candidate's research program, namely, its focus, planned approach and impacts, or benefits for the health system.

*(Do not type or paste more than will fit on a page.)*

*(Add additional pages as needed to a maximum of 10 pages. Please **sign** last page.)*

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**Section C - University's Statement**

*(to be completed and signed by sponsoring department head)*

This section is to be completed and a signed original mailed by the program/department chair of the sponsoring university. It is to include an evaluation of the candidate, rationale for nominating, and description of the support that will be provided by the University to the candidate.

- describe candidate's past performance;
- explain why the department/program, and university is recommending the individual candidate in relation to current and future research plans and priorities;
- detail the potential research environment for the candidate, including a description of the department/program, current faculty and health research resources and facilities;and
- identify a mentor, i.e. a senior faculty member who can advise the Career Scientist on his/her career development.

The below noted component is not a requirement on the part of the sponsoring University, but if addressed will serve to strengthen the candidate's application.

- describe the ways in which the department/program and university will assist the candidate in meeting the ongoing eligibility requirements of the Career Scientist Award program.

In addition, if the applicant does not hold an academic appointment, the sponsoring university should provide, at the time of application, a written statement of commitment of its intention with respect to a tenured, tenure stream, or other faculty position for their candidate within the next five years.

Candidates who hold an established faculty position supported from the regular operating funds of the university, institute or hospital are required to provide details about their current source(s) of salary support, namely whether their salary is from operating funds of the sponsoring University, or from grants or other "soft" sources.

*(Do not type more than will fit on a page.)*

*(Add additional pages as needed to a maximum of 3 pages. Please **sign** last page.)*

**Section D - External Reviewers/Appraisers**

**Please provide the names of up to 4 experts in the relevant research area to act as external reviewers / appraisers**

First Name		Last Name		
Address: (Building number; Street number, Street name, Suite)		City		
Province	Postal Code	Telephone (business)	Telephone (residence)	Fax number

First Name		Last Name		
Address: (Building number; Street number, Street name, Suite)		City		
Province	Postal Code	Telephone (business)	Telephone (residence)	Fax number

First Name		Last Name		
Address: (Building number; Street number, Street name, Suite)		City		
Province	Postal Code	Telephone (business)	Telephone (residence)	Fax number

First Name		Last Name		
Address: (Building number; Street number, Street name, Suite)		City		
Province	Postal Code	Telephone (business)	Telephone (residence)	Fax number

## **Career Scientist Conflict of Interest Guidelines**

External or internal reviewers are considered to be in conflict if they:

1. Are directly involved with a proposal, i.e. applicant, co-applicant or consultant;
2. Are from the same institution;
3. Collaborated with the candidate within the last ten years;
4. Have taught or supervised the candidate within the last ten years;
5. Are a friend or relative; and
6. May gain or lose financially from the obtainment of this grant.

In all cases, it is up to the reviewer to acknowledge their conflict of interest at the earliest stage possible.

A reviewer may also declare conflict with any application due to personal reasons.

**Section E - Letters of Recommendation**

All candidates are to arrange to have two letters of recommendation from supervisors or associates familiar with the candidate's work submitted directly to the Research Unit. If more than two letters are received for an application, only the first two received will be forwarded to the panel for review.

In addition, a further letter of recommendation is required from one decision-maker mentor at the Director level or above within the MOHLTC.

**Responsibilities of Decision-maker Mentor**

- Write a letter of recommendation for the Career Scientist at the application stage outlining:
  - o how the candidate's intended research program will contribute to evidence-based decision making in your program
  - o Activities for consideration during the award term
  - o An estimate of the scope of impact on the health care system of this program of research
  - o What proportion of Ontarians may benefit from the results of this research once it is implemented
  - o Your plans to work with the Career Scientist over the course of the award to engage in shaping their research program
  - o Other relationships you can foster between the Career Scientist and potential users of their research in the broader health care system.
  - o Commitment to participate in standing relevance review board for new Career Scientists applications as applicable

Commitment to regular quarterly contact with the Candidate through the duration of the Career Scientist award. The intention is for the relationship to last through the decision-maker and scientist's careers.

Annual mentor update reports for the Career Scientist's annual progress review.

**Note:** Being a decision-maker mentor does not require that the Director will host the Career Scientist on secondment if another more appropriate placement is found.

Click [here](#) for complete guidelines.

**Section F - Candidate's Curriculum Vitae**

The candidate's curriculum vitae of no more than 6 pages should be included here. The curriculum vitae is to be current and give details of employment, education, training, appointments, research experience, awards and grants received, and a list of publications and presentations.

*(Do not type more than will fit on a page.)*

*(Add additional pages as needed to a maximum of 6 pages. Please **sign** last page.)*

**Section G - Appendix**

A maximum of 15 pages of other relevant material or documentation, which would support the candidate's application, may be appended. Attachments exceeding the stated limit will not be reviewed.