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Name of Applicant (last name, first name):

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## **CHECK LIST - ATTACH TO FRONT OF APPLICATION**

**Provide 6 complete copies of the application (1 original plus 5 copies)  
Please collate all copies but do not use staples.**

### **EACH OF THE 6 COPIES MUST INCLUDE (IN THIS ORDER):**

- A completed and signed application form**
- Copies of cover and signature pages of applications submitted to other granting agencies for personal support** (see page 3, section B of this application form). Attach to the end of this application.
- Proof of degrees completed.** (Applicants must complete a Ph.D. or M.D. degree by the time funding commences.) Attach to the end of this application.
- Proof of Canadian licensure to practice medicine.** (Applies only to applicants with health professional degree.) Attach to the end of this application.
- Proposed supervisor's CV.** (A recent CIHR Common CV is acceptable.) Attach to the end of this application.

### **ITEMS TO BE ATTACHED TO APPLICATION OR FORWARDED UNDER SEPARATE COVER:**

- Original transcripts of the candidate's graduate and/or health professional training.** Transcript can either be forwarded to the BBDC directly from the institution, or attached to the application in its original sealed envelope. Photocopies will NOT be accepted. Certified true copies will only be accepted if the document bears the official stamp of the institution and authorizing signature. NOTE: Original transcripts can be returned to the candidate upon request.
- Letter of support from proposed supervisor.** Letter must be attached to the application in a separate, sealed envelope, signed across the seal by the supervisor.
- Reference letters from 3 individuals (other than the proposed supervisor but may include co-supervisor).** Letters can be mailed directly to the BBDC by the referees, or attached to the application in their original sealed envelopes, signed across the seal by the referees.

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It is the candidate's responsibility to ensure that every item on the application form is complete, and where allowed, forwarded by the application deadline date. **Late or incomplete applications will not be considered.**

**Deadline for receipt of applications, letters, and transcripts is  
5 p.m., Tuesday, February 23, 2010.**

**Applications, letters, and other items should be addressed to:**

Postdoctoral Fellowships  
Banting and Best Diabetes Centre  
Located at the Toronto General Hospital  
200 Elizabeth Street  
Eaton Building, 12E248  
Toronto, Ontario M5G 2C4

For further information, contact the Banting and Best Diabetes Centre:  
Phone: (416) 978-4656 • Fax: (416) 978-4108 • Email: [diabetes.bbdcc@utoronto.ca](mailto:diabetes.bbdcc@utoronto.ca) • Web site: [www.bbdcc.org](http://www.bbdcc.org)

**BANTING AND BEST DIABETES CENTRE**  
**Faculty of Medicine, University of Toronto**  
 1) BBDC Post-doctoral Fellowships (July 1, 2010 – June 30, 2011)  
 2) Hugh Sellers Post-doctoral Fellowship (July 1, 2010 – June 30, 2011)

Do not submit more than one application per candidate.  
 Type size must not be smaller than 12 point font.

<b>Name of Applicant</b> (last name, first name):	
<b>Title of Research:</b>	
<b>Permanent Mailing Address:</b>	<b>Home Phone:</b>  <b>Work Phone:</b>  <b>E-mail:</b>
<b>Date of Birth</b> (DD/MM/YYYY):	
<b>Citizenship:</b>  <input type="checkbox"/> Canadian <input type="checkbox"/> Other (specify country) _____  <b>If not a Canadian citizen are you a Permanent Resident in Canada</b> <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>If not, have you applied for Permanent Residency?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Transcripts and Degrees:</b>  <b>A. Attach official transcript(s) in sealed envelope to application (graduate and/or health professional training). Photocopies will NOT be accepted.</b> <b>If transcript(s) will be forwarded to the BBDC directly from the institution, check this box</b> <input type="checkbox"/>  <b>B. Attach proof of any degrees completed.</b> (Attach to the end of this application.)  <b>C. Applicants who hold a health professional degree must attach proof of Canadian licensure.</b> (Attach to the end of this application.)	
<b>Present appointment, employer, and supervisor</b> (include department and institution):	

**A. Below, list all agencies to which an application for personal support has been or will be made between September 1, 2009 and May 31, 2010. Include date of competition deadline.**

**B. Provide copies of the cover page plus the page on which your signature and your supervisor's signature(s) appear for all applications listed.** (Attach to end of application.) **IMPORTANT:** The BBDC will not fund applicants who do not apply to national granting agencies such as the CIHR, CDA, etc. for personal support between September 1, 2009 and May 31, 2010. Copies of the cover and signature pages documenting submission of such applications must be presented to the BBDC before funding will be released to successful applicants. **NO EXCEPTIONS WILL BE MADE.**

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**If granted, when will you be free to commence this award?**

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<b>Proposed supervisor</b> (name, department/institute, full address):	<b>Phone:</b>  <b>Fax:</b>  <b>E-mail:</b>
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**Proposed supervisor's primary University of Toronto department:**

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**Co-supervisor if applicable** (include name, department/institute, address):

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**List degrees and specialty certifications that you hold (include those expected in the next 12 months):**

<u>Type</u>	<u>Institute</u>	<u>Discipline</u>	<u>Date</u>

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**List honours and awards that you hold (include undergraduate, graduate and/or postgraduate):**

<u>Award</u>	<u>Type</u>	<u>Date</u>

Are you proceeding or planning to proceed to any additional degree? If so, specify degree, discipline, institute and year expected.

Indicate the expected duration of the proposed training and its relevance to your future career.

**POSTGRADUATE EXPERIENCE:**

List chronologically all postgraduate experience to date (include titles and dates of all appointments held and the institutions concerned). In the case of research experience (including M.Sc., Ph.D. and postdoctoral training) give the name of your supervisor(s) and the subject of your research. (NOTE: Applicants must be within the first 4 years of post-graduate research training to be eligible, and must have received a Ph.D. degree after July 2006, or an M.D. degree after July 2001.)

**PUBLICATIONS:**

On a separate page(s) attach a numbered list of your scientific papers. (Insert list after this page.) Clearly separate and identify each according to the categories below:

- (a) Papers in peer reviewed journals (published or accepted only)
- (b) Editorials and review articles
- (c) Chapters and books
- (d) Abstracts
- (e) Manuscripts submitted (include name of journal and date of submission)

**LOCATION OF PROPOSED RESEARCH TRAINING:**

**Department/Institute:**

**Address:**

**State distribution of the time and activities to be undertaken in this training program.**

**REFERENCE LETTERS:**

**Give the names and addresses of 3 individuals (other than your proposed supervisor but may include co-supervisor) whom you have asked to forward assessments of your past performance.** Letters can be forwarded directly to the BBDC by the referees, or attached to the application in their original sealed envelopes, signed across the seal by the referees. *Note to Referees: Please comment on candidate's characteristics and abilities (i.e. critical thinking, independence, perseverance, originality, organizational skills, interpersonal skills, leadership, communication skills, initiative, motivation, interest in discovery, research ability)*

**PROPOSED SUPERVISOR'S CV:**

**The proposed supervisor's CV must be attached to each copy of this application. A recent CIHR Common CV is acceptable. Limit publications to the last 5 years.** (Attach to end of this application.)

**LETTER OF SUPPORT:**

**A letter of support for the candidate is also required from the proposed supervisor. This must be attached to the application in a separate sealed envelope.** *Note to Supervisors: Please comment on candidate's characteristics and abilities (i.e. critical thinking, independence, perseverance, originality, organizational skills, interpersonal skills, leadership, communication skills, initiative, motivation, interest in discovery, research ability)*

**NATURE OF PROPOSED RESEARCH:**

**In the space below, describe the rationale, objective, and give a detailed experimental approach of the proposed research. Briefly state its relevance to diabetes. One additional page may be added. Figures must be included within the 2-page proposal, while references are restricted to one additional page.)**

In the space below provide a short summary of approximately 100 words of your proposed research in lay language.

**SIGNATURES:**

I have reviewed the terms and conditions and agree to abide by the regulations governing this award, if granted. I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that the BBDC will not release funding to successful applicants who have:

a) Not applied to national granting agencies for personal support between September 1, 2009 and May 31, 2010; and/or  
b) Not completed a Ph.D. or M.D. degree at the time of commencement of funding.

Candidate	Proposed Primary Supervisor	Head of Department or Institute at Proposed Training Location
Print name:	Print name:	Print name and title:
Signature:	Signature:	Signature:
Date:	Date:	Date: