



Canada Impact+ Research Training Awards – Nomination form

Privacy notice statement

The information you provide through this form is collected under the authority of the [Canadian Institutes of Health Research \(CIHR\) Act](#), the [Natural Sciences and Engineering Research Council \(NSERC\) Act](#), and/or the [Social Sciences and Humanities Research Council \(SSHRC\) Act](#). The collection, use, disclosure, retention and disposal of your personal information are in accordance with the [Privacy Act](#). Your information will be managed in accordance with Treasury Board Secretariat policies, directives and guidelines on [information management](#) and [protection of personal information](#) and the three federal research funding agencies' retention and disposition schedules.

The personal information collected through the nomination form will be used to evaluate eligibility for an award and administer and monitor awards. The information will be stored in CIHR, NSERC or SSHRC's corporate database, and access will be limited to agency staff on a need-to-know basis. The information may be shared between CIHR, NSERC, SSHRC, to determine the most appropriate funding jurisdiction for the proposed research and monitor overlap in federal support. Information may also be shared between the agencies and host institutions for award administration purposes. Providing your personal information is mandatory in order to participate in the Canada Impact+ Research Training Awards. Refusal to provide your personal information will result in your nomination being considered ineligible.

The information you provide may also be used and/or disclosed for program planning, design, and delivery; data and statistical analysis; research; performance measurement and monitoring, evaluation and review; and reporting publicly in aggregate, however this use will not result in an administrative decision about you. The information you provide will otherwise be kept confidential and will not be used or disclosed for any purpose outside of those indicated in this notice without your consent or as may be required bylaw.

Under the Privacy Act, you have the right to the protection of, access to, and correction of your personal information, which is described in CIHR [InfoSource](#) Chapter – Bank number: CIHR PPU 005 and CIHR PPU 025, in NSERC's [InfoSource](#) Chapter – Bank number: NSERC PPU 060, and in SSHRC's [InfoSource](#) Chapter – Bank number: SSHRC PPU 055. For more information about the agencies' privacy practices or to access or correct your personal information, please contact the relevant agency's ATIP office:

- CIHR's ATIP Coordinator at ATIP-AIPRP@cihr-irsc.gc.ca
- NSERC's ATIP Coordinator at ATIP-AIPRP@nserc-crsng.gc.ca
- SSHRC's ATIP Coordinator at ATIP-AIPRP@sshrc-crsh.gc.ca

If you believe your personal information has been mishandled or have concerns about CIHR, NSERC or SSHRC's privacy practices, you have the right to [file a complaint with the Office of the Privacy Commissioner of Canada](#).

By submitting your information, you are confirming that you have read and understood this Privacy Notice and agree to provide your personal information in accordance with it. Please ensure that any contacts listed in this form have agreed to be included and consent to providing their personal information for the purposes indicated above.



Part 1: Nominee information

To be completed by nominee

Family name	Given name	Middle name
Email		Telephone number
Address		Preferred language of correspondence English French
Country of residence		Citizenship
Personal Identification Number (PIN)		If other, indicate your country of citizenship

Part 2: Award information

Select the agency whose mandate best aligns with your field of research

NSERC	SSHRC	CIHR
Funding level requested	doctoral postdoctoral	Requested start date (mm/yyyy)

Part 3: Eligibility

Current level of study/academic history including number of months in PhD program	For postdoctoral: date (or anticipated date) of PhD completion (mm/yyyy)
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Work Experience

If not currently enrolled in a degree program list your most recent research work experience

Position held and nature of work (Full Time – Part Time)	Organization and department	Supervisor	Period (mm/yyyy-mm/yyyy)



Academic background

Include only currently enrolled in and/or past degrees obtained (up to five)

Degree	Name of discipline	Department, institution and country	Month and year started	Month and year awarded/expected

Part 4: Proposed research

Title of proposed research

Primary research area

Keywords (up to 10)

Summary of proposed research

Provide a brief outline of your proposed research in language that the public can understand (1,800 characters maximum in English, including spaces)



How does your proposed research align with the priority research areas? (1,800 characters maximum in English, including spaces)

Does your proposal involve the use of human beings as research subjects? If 'Yes', please consult the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans and submit your proposal to your organization's Research Ethics Board.	Yes	No
For statistical purposes, does the proposed research involve Indigenous Peoples or communities ?	Yes	No
(CIHR only) Is sex as a biological variable taken into account in the research design, methods, analysis and interpretation and/or dissemination of findings?	Yes	No
(CIHR only) Is gender as a socio-cultural factor taken into account in the research design, methods, analysis and interpretation, and/or dissemination of findings?	Yes	No
(CIHR only) Does your application propose research involving the use of human stem cells ? Please note that any project recommended for funding involving the use of human pluripotent stem cells must be reviewed by the Stem Cell Oversight Committee (SCOC) prior to Research Ethics Board Review.	Yes	No



(NSERC and SSHRC only) Have relevant equity, diversity and inclusion considerations been taken into account at any of the stages of the research process for your proposed research?

Yes

No

The stages of the research process include: research questions, design of the study, methodology, data collection, analysis, interpretation and dissemination of results.

By signing this form, I attest that:

- I am not currently affiliated with a Canadian institution
- I am currently studying or working abroad
- Doctoral nominees: I do not currently hold, nor have I previously held, any doctoral-level scholarships from any of the three agencies
- Postdoctoral nominees: I do not currently hold, nor have I previously held, any postdoctoral-level research award from any of the three agencies
- I have read and signed the Terms and Conditions of applying on page 8 of this form

Signature

Date (mm/dd/yyyy)



Part 5: Nominator information

To be completed by nominator

Family name	Given name	Personal Identification Number (PIN)
Email		Telephone number
Nominating institution (including faculty/department)		
Grant program name		Granting agency:
Expected grant end date		Grant reference # (if applicable)
Statement of support for nominee (1,800 characters maximum in English, including spaces)		



By signing this form, I confirm that:

- I have reviewed the proposed research with the nominee
- I am eligible to supervise the nominee as per my institution's policies and, if awarded, I will serve as the nominee's supervisor
- I have read and signed the Terms and Conditions of applying on page 8 of this form

Signature

Date (mm/dd/yyyy)

Part 6: Institution information and nomination confirmation

To be completed by the Vice President of Research or Dean of Graduate Studies or their delegate at the institution

Representative name

Representative title

Nominating institution (including faculty/department)

Email

Telephone number

(CIHR) Institution paid: The institution that will administer the award funds

(CIHR) Research institution: The primary institution where the research will be conducted

By signing this form, I confirm that:

- The nominator and nominee have been approved by the institution
- Doctoral nominees: if awarded, the nominee will be admitted into an eligible doctoral-level program in this institution
- Postdoctoral nominees: if awarded, the nominee will be hired as a postdoctoral researcher
- The institution will abide by the roles and responsibilities as set out in the [Agreement of the Administration of Agency Grants and Awards by Research Institutions](#) with the three federal granting agencies, including the [Tri-Agency Framework: Responsible Code of Conduct](#), the [Tri-Agency Guide on Financial Administration](#), and the [Tri-agency research training award holder's guide](#).

Signature

Date (mm/dd/yyyy)



Terms and conditions of applying

Before this nomination form is submitted to the agencies, you as a nominee or as a nominator, must read and agree to the following terms and conditions. It is your responsibility to retain a copy of the agreed terms and conditions for your records.

You are certifying that:

- You have provided true, complete, accurate information in your funding application and related documents and you have represented yourself, your research and your accomplishments in a manner consistent with the norms of the relevant field.
- You are not currently ineligible to apply for and/or hold funds from the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC) and the Social Sciences and Humanities Research Council (SSHRC) or any other research or research funding organization worldwide for reasons of breach of policies on responsible conduct of research, such as ethics, integrity or financial management policies. If at any time you become ineligible for any of these reasons, you will advise your institutional officials and the appropriate federal granting agency (CIHR, NSERC or SSHRC) immediately, in writing.
- You will comply with all of the policies, conditions and regulations referenced in the following documents, including but not limited to the [Tri-Agency Framework: Responsible Conduct of Research](#), the [Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans](#), the [Tri-Agency Guide on Financial Administration](#) and the [Canadian Council on Animal Care](#). This includes informing the appropriate federal granting agency of any notification of inspection or investigation by Health Canada in the case of an application for a clinical trial and the forwarding of a copy of any ensuing report to the agencies immediately upon receipt.
- If you are or have been (at any time during the past 12 months) a federal public servant, you have complied with and will continue to respect the [Values and Ethics Code for the Public Sector](#).
- In the event of any change in your eligibility status to apply for and receive funding for this initiative, you will inform your institutional officials immediately, in writing. They will, in turn, inform the appropriate federal granting agency (CIHR, NSERC or SSHRC).
- You consent to the sharing among the three federal granting agencies (CIHR, NSERC and SSHRC) and with any academic institution to which you are, or may become, affiliated, of any and all information, including personal information, in any way related to the administration of the application and award. You also consent to that information being used in consultation with other federal research funding agencies to determine the most appropriate review



mechanism or source of funding. In some cases, where applications are deemed to be more appropriately supported by another federal agency, the complete applications may be transferred in order to facilitate and expedite the merit review process.

- You understand that the following pertain to the information the federal granting agencies collect from and about you: the [Access to Information Act](#); the [Privacy Act](#); the [Use and disclosure of personal information provided to NSERC](#), SSHRC's [Collection, use and disclosure of personal information](#) and CIHR's [Info source – Sources of federal government and employee information](#).
- **For nominators:** if you are a recipient of a grant that is subject to the [Policy on Sensitive Technology Research and Affiliations of Concern \(STRAC Policy\)](#) requirements — or you are expecting to apply for such a grant in the future — you are aware that these requirements may extend to your prospective nominees. Prospective nominees who have an active affiliation with or are in receipt of financial or in-kind support from a [Named Research Organization](#) must terminate this relationship before joining any research team that is supported by a grant in scope of the STRAC Policy and that aims to advance a [Sensitive Technology Research Area](#). Consult the [Tri-agency Guidance on the STRAC Policy](#) for more information on the requirements that apply to federal grants subject to the STRAC Policy.

If you fail to comply with any of the above, you may be subject to the process and recourse outlined in the [Tri-Agency Framework: Responsible Conduct of Research](#).

You are also confirming that, during tenure of the award, you will comply with the terms and conditions of the award.

Consent to disclosure of personal information

You understand that maintaining public trust in the integrity of researchers is fundamental to building a knowledge-based society. By submitting any application or by accepting funding from CIHR, NSERC or SSHRC, you affirm that you have read and you agree to respect all the policies of these agencies that are relevant to your research, including the relevant provisions of the [Tri-agency Framework: Responsible Conduct of Research](#). In cases of a serious breach of agency policy, the agency may publicly disclose any information relevant to the breach that is in the public interest, including your name, the nature of the breach, the institution with which you were affiliated at the time of the breach, the institution with which you are currently affiliated, and the recourse imposed against you. You accept this as a condition of applying for, or receiving, agency funding, and you consent to such disclosure. If you do not agree to the disclosure of your personal information, you cannot participate in this application. For further information, see the [Consent to Disclosure of Personal Information Policy – Frequently Asked Questions](#).



Confirmation of agreement to the terms and conditions

If you have any concerns about your ability to comply with the terms and conditions listed above, contact your institutional official or the appropriate granting agency's staff responsible for the program immediately. Do not agree to the terms and conditions and do not submit your nomination form until you are certain that you can and will comply with all of the requirements.

I confirm the truth of all statements made by me in this nomination form and agree to all of the terms, conditions, responsibilities and obligations as set out above.

Nominee Signature

Date (yyyy/mm/dd)

I confirm the truth of all statements made by me in this nomination form and agree to all of the terms, conditions, responsibilities and obligations as set out above.

Nominator Signature

Date (yyyy/mm/dd)