

2024 Post-Doctoral Fellowships: Application Form

A. Personal Details - please complete in full

Surname	Given Name	
Address	City	
Province /Territory	Postal Code	
Telephone	E-mail	

B. Education – Degrees/Diplomas obtained

Name of Institution and Degree	Dates of Study
1.	
2.	
3.	
4.	

C. PhD Information

Name of Institution		
Name of PhD Supervisor		
Name of Department		
Start Date	Graduation Date	
Are you a health professional? If yes, please specify:		



D. Post-Doctoral Information

Name and Affiliation of Post-Doctoral Supervisor (HSPN Investigator)					
Research Theme associated with areas of HSPN work (review http://hspn.ca)					
E. Funding for 202	23 If funding you have garnered or for whi	ch vou have :	annlied for	2023	
	Support Grant Applications	on you have	арріїса іої	2020	
Operating Grant App	plications				
Fellowship Total \$		Grant Total \$			
F. HSPN Network					
How did you hear about	the HSPN Post-Doctoral Fellowship oppor	rtunity?			
G. Applicant Acknowledge	owledament				
I certify that to the best of my knowledge, the information provided in this application is complete and accurate, and that, in accepting a fellowship, I will abide by the conditions outlined in the fellowship guidelines.					
Signature of Applicant			Date		



H. Research Statement - Complete this section carefully, adhering to the guidelines below (maximum 3 pages, Times New Roman and minimum 11 point font size). You must answer each of the three sections, separately numbering each section. Submit your research statement as an attachment. Indicate your name on each page in the top right hand corner.

Section 1:	The Research Problem/Issue – Maximum 1 page Identify the research problem/issue that you plan to address while holding an HSPN Fellowship, and how you plan to investigate it. Describe the background experiences that have prepared you to undertake this study.
Section 2:	Fit with HSPN Research Foci – Maximum 1 page HSPN fosters cross-sectoral collaborative research and produces new knowledge about the measurement and improvement of health system performance across the continuum of health care services. We encourage applications with a particular emphasis on equity measurement and advancement in the health system. With this in mind, please address the questions under the headings below:
	HSPN Demonstrate your interest in HSPN. Why do you want to be part of HSPN? How would an HSPN Fellowship benefit you as a scholar? How do you see HSPN potentially shaping your career trajectory? What would you bring to the HSPN network (e.g. disciplinary perspectives, skills and abilities, etc.)?
	Research Foci Explain how your proposed research project fits within the HSPN quadruple aim framework, and how your project will contribute to HSPN's growing body of knowledge. You must also indicate which HSPN network member would be best suited to support/mentor your research and explain your rationale for the selection. Refer to the HSPN website: http://hspn.ca .
Section 3:	Knowledge Translation – Maximum 1 page Describe the implications of your research for the health and well-being of Ontarians, and what approaches you will use to ensure your research findings are meaningful to providers and decision-makers in the Ontario health system.