**CANADA EXCELLENCE RESEARCH CHAIRS PROGRAM**

**PHASE 2 NOMINATION**

**Curriculum Vitae Form**

**Nominating Institution:**

**Title of CERC:** Canada Excellence Research Chair in

**Academic Background**

List your academic and professional experience beginning with the most recent.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Degree** | **Year** | **Discipline/Field** | **Institution** | **Country** |
|  |  |  |  |  |

**Experience (academic, research, professional and industrial)**

List your work experience beginning with the current or most recent position.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Position Held and**  **Institution/Organization** | **Department/Faculty** | **Country** | **Period (Year)** | |
| **From** | **To** |
|  |  |  |  |  |

**Research Support**

List sources of research support over the last five years, either held (A) or currently applied for (B), either as an applicant or co-applicant.

List grants and contracts from all sources, including industry and academic research institutions.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Title of Project and**  **Family Name and Initial(s)**  **of Principal Applicant** | **Role in Project (e.g., principal investigator, co-principal investigator, co-applicant, lead, etc.)** | **Funding Source and Program** | **Amount Per Year** | **Status (A or B)** | **Years of Tenure** | |
| **From** | **To** |
|  |  |  |  |  |  |  |

**Research Training**

Indicate the number of highly qualified personnel (HQP) that you have supervised or co-supervised over the past five (5) years.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Supervised** | **Co-supervised** | **Total** |
| **Undergraduate** |  |  |  |
| **Master’s** |  |  |  |
| **Doctoral** |  |  |  |
| **Postdoctoral** |  |  |  |
| **Other** |  |  |  |
| **Total** |  |  |  |

Based on the aggregate information above, provide details about the individuals you have supervised or co-supervised during the **five years prior** to this submission. Please include the type of HQP training (e.g., undergraduate, master’s, technical, etc.), status of trainee (completed, in progress, incomplete), number of years supervised or co-supervised, the research area of the project, and the individual’s immediate position once their training with you was completed. There is no limit to the number of entries.

Based on the federal [Privacy Act](http://laws-lois.justice.gc.ca/eng/acts/p-21/)rules governing the collection of personal information, the names of the students are **not** requested, and identifying information should **not** be included.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Row #** | **Type of HQP Training** | **Status**  **(Completed, In Progress or Incomplete)** | **Total Years Supervised or Co-Supervised** | **Research Area** | **Position Obtained Immediately Following Training** |
| **Example** | | | | | |
| 1 | PhD | Completed | 5 | Antibacterial inhibitors | Research executive in pharmaceutical  Industry |
|  | | | | | |
|  |  |  |  |  |  |