Please note the following:

1. **Completion of the Department Head form online at ApplyNet is required. Do not submit the form online until you receive confirmation from the Dean’s Office.**
2. **The information provided on this form is required as part of your application package.**
3. **Applicants not employed by UBC (i.e. Health Professionals, most Clinical faculty, Partner faculty, etc.), must provide a sponsor letter from his/her employer to his/her UBC Department Head confirming available resources and protected time for the applicant.**

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| **APPLICANT** | **DEPARTMENT HEAD/SCHOOL DIRECTOR** | |
| **PROJECT TITLE** | | |
| **1. Confirmation of Appointment** | | |
| Does the applicant have a current faculty appointment at your institution, or if successful at receiving this MSHRBC Scholar award, will they have a faculty appointment in place before/by July 1, 2023?  Choose an item. | | |
| **2. Protected Time** | | |
| If successful in receiving this MSHRBC Scholar award, will the applicant have at least 75% protected time as stipulated in the competition guidelines for research activities for the duration of the award?  Choose an item. | | |
| 3. **If you selected “No” to question #1 or #2**, please provide a brief explanation. **If you selected “Yes” to question #1 and #2, please enter “Not Applicable”**. (Limit: 2500 characters) | | |
| **4. Type of Academic Appointment** | | |
| Please indicate the type of academic appointment the applicant currently holds or will hold. (Limit: 190 characters)  Choose an item.  If Other, please specify (limit 500 characters): | | |
| **5. Salary Support** | | |
| Is the applicant currently in (or at the time of the award, will the applicant be in) a tenured or tenure-track position with a salary line identified from your institution?  Choose an item.  **If you answer Y, please complete question #6 and skip #7. If you answer N, please skip question #6 and complete #7.** | | |
| **6. Use of Salary Award** | | |
| **Only complete if you answered Y to question #5:** **In discussion with the applicant**, please provide a brief explanation of how the funds from MSHRBC will be utilized. If MSHRBC funds are to be used for the applicant’s salary, please provide a description of how the freed-up funds from their institutional salary line will be used to support the applicant’s research program and the impact this will have on their research and career. (Limit: 2500 characters) | | |
| **7. Support for the Applicant post-MSHRBC funding** | | |
| **Only complete if you answered N to question #5:** Please describe the department’s plan for the applicant’s salary support and further development beyond the five years of the Scholar award. (Limit: 2500 characters) | | |
| **8. Institutional Support to the Applicant** | | |
| Please describe additional resources available to the applicant (e.g. salary, infrastructure, administrative support, human resources, mentorship, thought leadership) not including funds from the MSHRBC award. Where applicable, please comment on any concrete practices or resources in place to foster and support an accessible, diverse and inclusive environment. (Limit: 2500 characters) | | |
| **9. Other Responsibilities of the Applicant** | | |
| Please describe the non-research activities that the applicant is expected to engage in (e.g. teaching, clinical service, administrative work, corporate involvement, service on committees and boards, community service, etc.) (Limit: 2500 characters) | | |
| **10. Applicant’s Contributions** | | |
| Please describe the applicant’s current or potential contribution to the department and/or the host institution. Include research interactions between the applicant and their colleagues and other research programs, the nature of the association, contribution to the goals and strategic direction of the department and/or host institution. (Limit: 2500 characters) | | |
| **11. Mentorship Plan for the Applicant** | | |
| Please describe the mentorship plan for the applicant (i.e. what mentorship will the applicant receive during the course of the Scholar award to enhance their research skills, and advance their career?). Where applicable, please comment on any concrete practices or resources in place to foster and support diversity and equity in mentoring and professional development. We recommend reviewing the [Scholar Evaluation Criteria](https://healthresearchbc.ca/wp-content/uploads/2022/10/2023_Scholar_Evaluation_Criteria.pdf) (Environment and Support) before completing this section. (Limit: 2500 characters) | | |
| **DEPARTMENT HEAD/SCHOOL DIRECTOR SIGNATURE** | | **DATE** |

Please DO NOT SIGN this form until requested by Dean’s Office