

APPLICATION

<p>2009 CSNZ</p> <p>TRAINING SCHOLARSHIP</p>
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SECTION 1 – SUMMARY

Title	Surname of Applicant	Given Names
<hr/>		
Dr		
<hr/>		
Present Position	Department	Institution
<hr/>		

Abstract of intended programme, relevance to cancer and future career proposals in the field of cancer studies:

Examination Course (if any)

Supervisor/Collaborator

Dr

Include overseas supervisor if relevant

Position	Department	Institution
<hr/>		

REFEREES: Name of two referees to whom a copy of the applicant has been forwarded, and who have been asked to provide the CSNZ with a confidential report on the candidate. The **Supervisor and Head of Department** may act in this capacity. **Return slips** for forwarding to the nominated referees are included with the application package.

NAME	FORM FORWARDED (Date)			
1.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border: 1px solid black; height: 20px;"></td> <td style="width: 33%; border: 1px solid black; height: 20px;"></td> <td style="width: 33%; border: 1px solid black; height: 20px;"></td> </tr> </table>			
2.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border: 1px solid black; height: 20px;"></td> <td style="width: 33%; border: 1px solid black; height: 20px;"></td> <td style="width: 33%; border: 1px solid black; height: 20px;"></td> </tr> </table>			

CSNZ SOCIETY OF NEW ZEALAND INC

SECTION II – BIOGRAPHICAL DETAILS OF APPLICANT

Name	Birthdate
	Male <input type="checkbox"/> Female <input type="checkbox"/>
	Marital Status: Married <input type="checkbox"/> Single <input type="checkbox"/>
	No. of Dependents

Address: _____

Email: _____ Telephone: (daytime) _____

Nationality _____

Degrees etc	University	Years Conferred	Scientific Field

honours/prizes etc _____

membership of societies _____

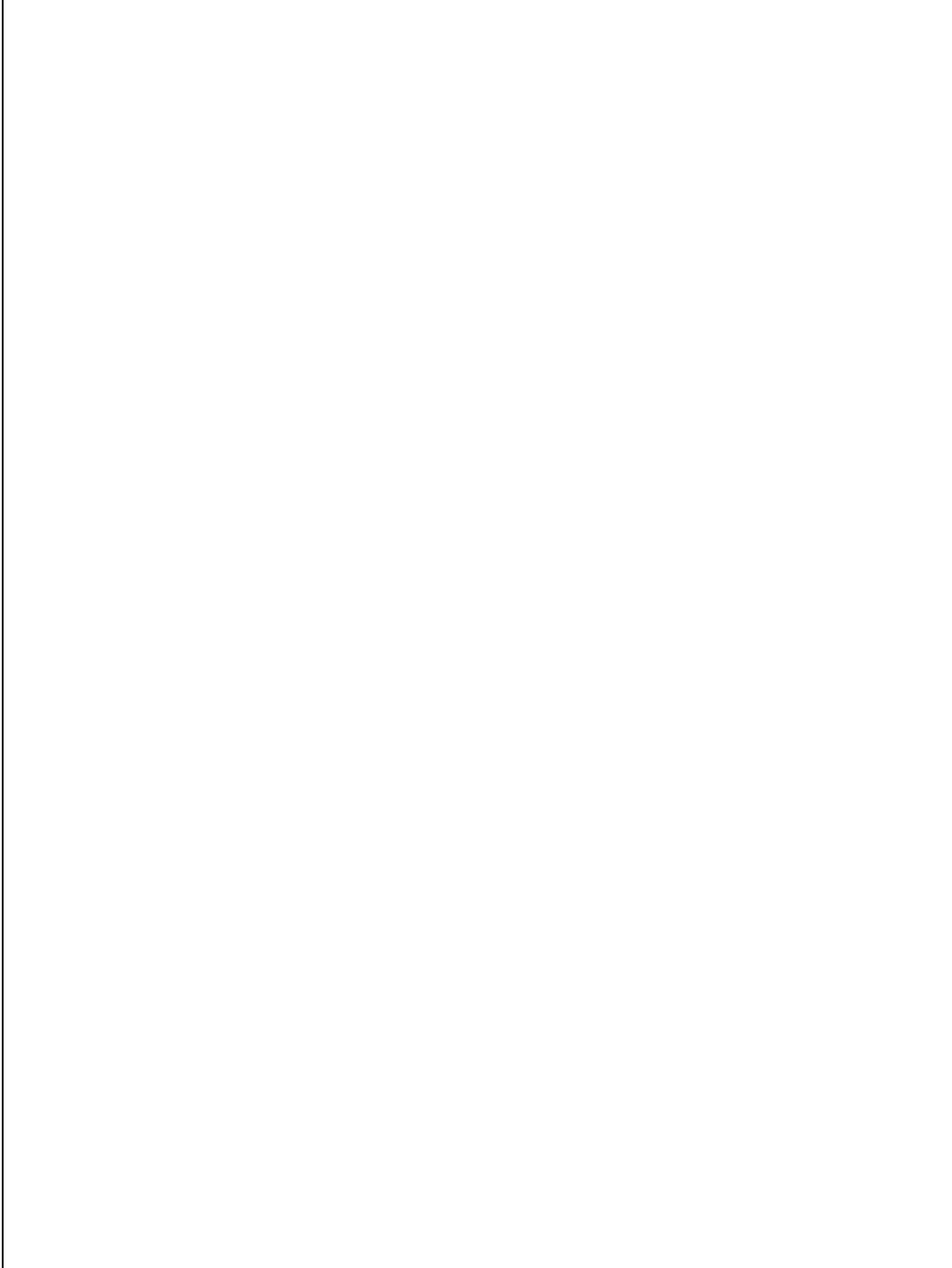
fellowship/scholarships _____

Publications – total number _____. List on continuation sheet major papers published during the past five years. Papers accepted for publication may be included. (Two copies of each major publication should be forwarded with the application).

- Academic and research experience
- (a) **attach copies of undergraduate and graduate records detailing courses taken and grades obtained.**
 - (b) outline other academic and research experience to date (use continuation sheet if necessary)

Date _____ Signature _____

SECTION II con't



SECTION II con't

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SECTION III – PROPOSED PROGRAMME

Applicants should provide a general exposition of their proposed programme which should include the following information:

- general field of research interest and longer term research interest
- the reason for selection of the particular supervision/collaborator and department
- the way in which the proposed period of CSNZ sponsorship will fit into the career development of the application
- the relevance of the programme to cancer and the prospects for a future career in a cancer-related field in New Zealand.
- a brief outline of the proposed project.

SECTION III con't



**CSNZ TRAINING SCHOLARSHIP
REFEREE REPORT ON APPLICATION**

APPLICANT'S NAME	<input style="width: 100%;" type="text"/>
SPONSORING INSTITUTION	<input style="width: 100%;" type="text"/>

NOTE TO REFEREES

The abovenamed has selected you as a referee for a Cancer Society Scholarship. Your co-operation in completing this inquiry would be appreciated.

CHECK ONLY those qualifications which show the **strongest points** describing the applicant:

- | | |
|--|--|
| <input type="checkbox"/> Originality | <input type="checkbox"/> Ability to organise scientific data |
| <input type="checkbox"/> Accuracy | <input type="checkbox"/> Familiarity with research literature |
| <input type="checkbox"/> Research Ability | <input type="checkbox"/> Proficiency in laboratory work
(if relevant) |
| <input type="checkbox"/> Scientific background | <input type="checkbox"/> Clinical proficiency, (if relevant) |
| <input type="checkbox"/> Perseverance in pursuing goals | <input type="checkbox"/> Relevance of programme to cancer |
| <input type="checkbox"/> Future prospects in the field of cancer | |

Overall grading of applicant: MARK ONE **A** **B** **C** **D**

I was associated with this applicant from:

to

as:

TITLE AND NAME OF REFEREE:

ADDRESS:

SIGNATURE:

DATE:

PLEASE RETURN TO:

The Medical Director
Cancer Society of New Zealand Inc
PO Box 12700
Wellington, 6144 New Zealand
EMAIL: admin@cancer.org.nz
FAX: 0064 4 494 7271

PLEASE COMPLETE THE FOLLOWING PAGE –

Describe the qualifications you consider of special significance in judging the applicant's fitness for a research career in cancer studies and any other general comments you consider of relevance to this application.

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