**COURSE APPLICATION FORM**

**PERSONAL INFORMATION**

Last Name:

Given Name(s):

**CONTACT DETAILS**

Business Phone:

Cell Phone:

Email:

**EMPLOYMENT DETAILS**

Where do you work at THP?

What is your position or role?

**ACADEMIC BACKGROUND**

a) Indicate all university degrees obtained and those in progress (where applicable) starting with the most recent.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Degree** | **Degree Name & Specialty** | **Institution** | **Start Date (year)** | **End date (year)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

b) Please list all graduate courses you have completed as part of your graduate education related to research or statistics (e.g., qualitative methods, quantitative methods):

|  |  |  |
| --- | --- | --- |
| **Course/Certificate obtained** | **Institution** | **Date Completed (MM/YY)** |
|  |  |  |
|  |  |  |
|  |  |  |

c)In addition to formal courses, please describe any other research training you have received:

**APPLICANT EXPECTATIONS AND COURSE INTEREST**

Please answer the following questions:

1. Please describe your previous experience in research and/or leadership (e.g., time as a research team member, grant reviews):
2. Please describe the research or quality improvement idea that you would like to develop through this course, and the type of research methods (i.e., interviews, survey, evaluation or cohort study) you think may be appropriate for this research question:
3. Please list 3 personal learning goals you hope to achieve from this course:
4. Please indicate how you heard about this course?
5. Have you negotiated with your immediate supervisor protected time to participate in class sessions (i.e. biweekly 3 hour sessions from March 2 to June 27) and to set aside appropriate time to complete course assignments?

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Applicant Signature Supervisor Signature

Date: Date:

Thank you for your interest. Potential candidates will be selected on the basis of academic eligibility and personal response to course expectations and interest.

**PLEASE SUBMIT YOUR APPLICATION BY DECEMBER 1, 2016 TO:**

**Patti Harbman NP-PHC, PhD at** [Patti.Harbman@trilliumhealthpartners.ca](mailto:Patti.Harbman@trilliumhealthpartners.ca)

**Lisa Brice-Leddy PT, MSc (RS) at** [Lisa.Brice-Leddy@trilliumhealthpartners.ca](mailto:Lisa.Brice-Leddy@trilliumhealthpartners.ca)