



Identification

Identification of the Director of university research centre or department

The director has to complete and submit his electronic form to allow the submission of the candidate's form to the FRQS **before the institution deadline** which is available on the page "As a director, supervisor or mentor", column "Your institution's deadline".

PIN

User account

Name

Candidate Identification

The following information from the candidate's application form is posted for reference purposes only.

Candidate PIN

Candidate Name

Title of the research project

Program name Clinical Research Scholars

Deadline

POUR

INFORMATION

SEULEMENT

Name:

File number: 340225

Funding obtained - Applicant

If the candidate is not currently a Research Scholar or a Clinical Research Scholar, please specify if he (or she) receives a salary support. If the candidate is currently a Research Scholar or a Clinical Research Scholar, select "Not Applicable".

Salary Support

If yes, what is the source Université / University
 Centre / Centre
 Autres / Others

If other, specify

Start up fund

Does the candidate receive other financial resources from your institution?

Other financial resources

Amount

Duration

POUR
INFORMATION
SEULEMENT

Name:

File number: 340225

Offered resources

Describe briefly:

- a) the size and location of the laboratory;
- b) the particular equipment;
- c) the common facilities available to the applicant for the achievement of his research program;
- d) any other support not described in Section "Funding obtained - Applicant".

Type of document Resources available

File name	Type de document	Date	Size (KB)	Delete
-----------	------------------	------	-----------	--------

POUR
INFORMATION
SEULEMENT

Name:

File number: 340225

Tasks and responsibilities

Indicate the tasks and responsibilities that the candidate must assume behind his research. Describe the nature, the institution in which they occur and time (hours / year) to achieve (maximum 500 words):

- a) teaching activities (excluding the supervisory of research students);
- b) administrative tasks
- c) describe the clinical activities and estimate the percentage of time required;
- d) other.

Type of document Tasks and responsibilities

File name	Type de document	Date	Size (KB)	Delete
-----------	------------------	------	-----------	--------

POUR
INFORMATION
SEULEMENT

Name:

File number: 340225

Applicant's contribution

Explain the strategic significance of the applicant's participation in the center or the department (maximum 500 words).

Type of document Applicant's contribution

File name	Type de document	Date	Size (KB)	Delete
-----------	------------------	------	-----------	--------

POUR
INFORMATION
SEULEMENT

Name:

File number: 340225

Signature and submission

FORM FOR DIRECTORS

1. I certify that the information that I have provided and shall provide regarding this application or an eventual grant is accurate and complete.
2. I have read the application for funding and applicable program rules.
3. If the applicant is required to use the award in Quebec in accordance with the **Common General Rules** (see the "DOCUMENTS" tab), I confirm that, if granted, the applicant will pursue his or her research activities with a continuous physical presence in Quebec.
4. I shall supervise the applicant's research and provide the applicant with the material and financial means required to carry out the research project according to the requirements of the funding program.
5. In my role as director, I shall adopt a responsible conduct in research, comply with the generally accepted standards of ethics and integrity and support and encourage the applicant with regard to his/her commitment to the ethical and responsible conduct of research. These standards are outlined in the **Common General Rules**, in the **FRQ's Open Access Dissemination Policy**, in the **Policy for the Responsible Conduct of Research** of the FRQ, in the **Standards du FRQS sur l'éthique et de la recherche en santé humaine et intégrité scientifique**, as they are periodically updated (see the DOCUMENTS tab) and in the policies of the institutions with which the applicant and I are affiliated.
6. In the event of a breach of responsible conduct of research allegation, I accept that the FRQ may exchange personal and confidential information concerning myself with the managing institution and the following organisations, if applicable, in Canada or abroad: their financial partners for the program to which the allegation relates; any institution concerned by the allegation; and any public research funding agency concerned by the allegation. This information may include: the allegation, the supporting documents, the review report, etc.
7. I understand that the information that I have provided and shall provide to the Fonds shall be treated in accordance with the Act respecting Access to Documents Held by Public Bodies and the Protection of Personal Information (CC-PA-2.1) as well as with the **Statement regarding the protection of personal and confidential information** (see the DOCUMENTS tab).
8. I understand that, in accordance with the Act, the applicant may request to access the information contained in his/her FRQ file. I understand that all the information I shall provide to the FRQ in relation to his/her application, including my own personal information, may be accessed by the applicant upon his/her request.

Identification

- I accept Yes
 No

Instructions

- Step 1:** Please validate the submission of your electronic form to make sure all sections needed are filled.
Step 2: Submit your electronic form at the FRQS, before the deadline. Otherwise, the candidate's application will be deemed incomplete.
IMPORTANT NOTICE: If you make modification after an electronic submission, you must re-submit your form at the FRQS. You must redo steps 1 and 2.