Committee Member

• Faculty with no graduate



Supervisor

• Must show graduate student (co-)

4.

Application for Supervisory Status in Graduate Studies Programs at NOSM

Please submit this form along with a current Curriculum Vitae and a photo (.jpeg or .png) to graduatestudies@nosm.ca.

Criteria for Supervisory Privileges

• Must show evidence of peer

Co-Supervisor

 supervision in the past 4 years. Must have minimum of 2 peer reviewed publications in past 4 years May have had limited committee or co-supervisory experience in the past 4 years with the past. 	ons in					
PART ONE: Background Information	_					
Name:						
Preferred Email:						
Division/NOSM Appointment:						
Appointment Rank:						
Date of NOSM Appointment/Affiliation:						
Do you currently have Supervisory status in Graduate Studies Programs at NOSM? ☐ No ☐ Yes						
→ If yes, what is your current Supervisory status? □ Supervisor □ Co-Supervisor □ Committee Member						
Education: (Include Degree and Speciality, Institution, and year awarded)						
1.						
2.						
3.						

PART TWO: Research Experience (within the past 4 years)					
List of peer reviewed publications and other scholarly publications:					
Scholarly Roles (Journal Editor, Peer review reviewer, Grant Reviewer, etc.):					
Peer reviewed grant funding awarded (include name, funding agency, funding amount and years):					
Conference presentations, invited talks, abstracts etc. (include title, conference name, conference location and year of presentation):					

Part Three: Summary of Supervisory Experience in the past four years. Do <u>not</u> include research projects from undergraduate medical students, medical residents, and fellows.

		Master's Degree	Doctoral Degree
Primary Supervisor	Number of students you are currently		
	supervising		
	Number of students who have completed		
	their degree under your supervision		
Co-Supervisor	Number of students you are currently		
	supervising		
	Number of students who have completed		
	their degree under your supervision		
Supervisory	Number of students you have served as a		
Committee	member of a Supervisory Committee		
Thesis Examination	Number of Thesis Examination		
Committee	Committees on which you have served		

Supervisory Experience: Please complete the table below identifying the students you have supervised, cosupervised, or participated on their committee:

Name of Student	Title of Thesis	Institution	Program Start and End Date	Supervisory Role

PART FOUR: Faculty Profile Content for the Graduate Studies Website

(https://www.nosm.ca/research/graduate-studies/master-of-medical-studies/graduate-studies-supervisors/)

The profile information you provide below will assist interested graduate students identify potential supervisors who share similar research interests. ☐ Include a photo (.jpeg or.png) of yourself with this application form. The photo will be used for your supervisory profile on the Graduate Studies Supervisory Website. **Research Keywords:** Research Interests, current and/or past research projects: Grants and Awards you would like to highlight: Publications you would like to highlight: Links to external research project websites that you would like to highlight:

Any personal information that you provide to the Research and Graduate Studies Office is collected in compliance with the <u>Freedom of Information and Protection of Privacy Act (FIPPA)</u>. The personal information that you provide will be

used only for the purpose(s) for which it is collected, and not in any other way without your consent.