**Stem Cell Network Trainee Communications Committee**

**Application Form**

**Application Deadline: Friday, February 24, 2023**

Complete all sections below and return to [earnold@stemcellnetwork.ca](mailto:earnold@stemcellnetwork.ca) by the deadline.

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| --- | --- |
| Applicant Information | |
| Surname: | Given Names: |
| Position & Year of Study:  *(i.e. MSc Student, PhD Student, Post-Doc, Research Associate, Technical staff)*: | Institution name: |
| Phone number: | Email address: |

|  |  |
| --- | --- |
| Your Supervisor Information | |
| Surname: | Given Names: |
| Phone Number: | Email address: |

1. Provide your CV and cover letter. In your cover letter please address the following:

* Why you want to join the SCN Trainee Communications Committee (TCC)
* Your duration and experience as a Stem Cell Network Trainee
* Your leadership skills and reliability as a leader
* What types of events/workshops/initiatives you would lead as a member of the TCC (see page 1 for examples of TCC-affiliated Workshops)
* Any other experience, skills, or lived experience that you would bring to the TCC and how this would benefit the committee.

1. Provide a letter of reference from your supervisor. Your supervisor’s letter should be emailed directly to [eearnold@stemcellnetwork.ca](mailto:eearnold@stemcellnetwork.ca) by the application deadline.

**Demographic Question Section**

**Why SCN collects demographic/self-identification information:** SCN is committed to monitoring the equity of our training programs and cultivating a culture of inclusion in research. Self-identification information is used for SCN’s reporting purposes with the Government of Canada. All data reported to the Government of Canada is de-identified, aggregate data. The inclusion of pronouns is optional; however, it helps SCN staff in their communication and correspondence with individuals. [See SCN’s EDI Statement here](https://stemcellnetwork.ca/about-us/).

|  |  |
| --- | --- |
| Select a gender identity option that applies: | My pronouns are: |
| Man  Woman  Non-binary  Prefer not to disclose  Another identity not identified above:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | He/Him  She/Her  They/Them  Prefer not to disclose  Other pronouns not identified above:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Select (a) population group option(s) that apply/applies: | |
| Indigenous (First Nations, Métis, Inuk Inuit, other indigenous descent)  Black (African, Afro-Caribbean, African Canadian descent)  East Asian (Chinese, Korean, Japanese, Taiwanese descent, other East Asian descent)  Southeast Asian (Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent)  South Asian (East Indian, Pakistani, Bangladesh, Sri Lankan, Indo-Caribbean, other South Asian descent)  Middle Eastern (Arab, Persian, Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish, other West Asian descent)  White (European descent)  Latino/Latina (Hispanic)  Another group not identified above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Do not know  Prefer not to disclose | |
| Do you identify as a person with a disability? *That is persons who have long-term physical, mental, intellectual or sensory impairments which may hinder their full and effective participation in the workplace or society on an equal basis with others.* | |
| Yes  No  Prefer not to disclose | |
| Citizenship | |
| Canada (Including Permanent Residency)  International: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |