

Bloorview Research Institute

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APPLICATION FORM

1. Applicant	
Last Name: Click here to enter text.	First Name: Click here to enter text.
2. Current Address:	
Click here to enter text.	
3. Telephone Number(s):	
Click here to enter text.	
4. Fax number:	
Click here to enter text.	
Email address:	
Click here to enter text.	
6. University and Department where thesis was defended:	
Click here to enter text.	
7. Title of Thesis:	
Click here to enter text.	
Date defended: Click here to enter a date.	
8. Name, address and contact information of	of PhD Supervisor:
Click here to enter text.	
9. Where did you hear about the Pursuit Award in Childhood Disability?	
Click here to enter text.	



APPLICATION PACKAGE CHECKLIST

□ Application Form
\square Brief biographical sketch of candidate (1/2 page)
☐ Current curriculum vitae of applicant (3 page maximum)
☐ Thesis title and abstract
\square List of all publications arising from thesis (in print or in press)
$\hfill\Box$ Up to three preprints or reprints (include a description of contribution by applicant for each publication)
$\hfill 2$ letters of support- commenting on quality of research contributions to date
$\hfill \Box$ Letter of support from supervisor, describing why thesis is deemed an outstanding contribution to the field and why the student should be considered for the award
Please submit the application in one PDF to:

brievents@hollandbloorview.ca