

POST DOCTORAL (PhD) CLINICAL BIOCHEMISTRY FELLOWSHIP APPLICATION FORM

Application Pre-requisites:

- ☐ I am a Canadian Citizen or Permanent Resident of Canada.
- ☐ I am legally allowed to work in Canada.

This application form shall be used to apply for the **CLINICAL BIOCHEMISTRY** fellowship program if listed as open in this application cycle. Please visit the [DPLM website](#) "Clinical Fellowships & AFC Programs" section for Post Graduate MD Fellowships.

It is the applicant's responsibility to ensure that they satisfy **ALL** of the application pre-requisites (above) **AND** the application (including letters of reference) is **COMPLETE** and received in the Fellowship Office by the deadline of **NOVEMBER 1 at 1600h MST.**

For questions or concerns regarding the application process, please email CalgaryFellowship@albertaprecisionlabs.ca.

Please adhere to, and complete, the application checklist below:

- ☐ Completed Application Form
- ☐ Curriculum Vitae (C.V.) attached
- ☐ Full copies of precisely three (3) peer reviewed publications where authorship has been indicated
- ☐ Official university transcripts, or academic records, must be drawn up and sent from the registrar office of each institution *directly* to the office. Copies of any completed degrees or awards received may be included. ****Note: When education was obtained at an institution outside Canada or the USA, a course-by-course evaluation of those credentials must be submitted from the evaluation agency *directly* to the office.**
- ☐ Three (3) letters of reference, as well as the attached reference form, submitted to the Office ***directly*** from the referee. These letters must be current at the time the application is submitted and should attest to familiarity with the applicant's professional expertise, the length of acquaintance, and the good character of the applicant. Training Committee selection members may not serve as references. Letters can be submitted via email OR mail to:

APL Clinical Biochemistry Fellowship Program

Attention: Shawna Pitman, Program Administrator
Alberta Precision Laboratories

Email: ChemistryFellowship@albertaprecisionlabs.ca

Address: Diagnostic and Scientific Centre, 4th floor Admin
9, 3535 Research Road NW Calgary, AB T2L 2K8



Section 1 Applicant Demographics

Full Name (Last, First Middle):	Fellowship Program Applying for:
Current Mailing Address:	Email Address (non-institutional):
	Phone Number:
	Canadian citizenship status:
Permanent Mailing Address:	Current Occupation or Position:

Section 2 Curriculum Vitae & Attachments

Please attach your entire curriculum vitae as a separate document with your application.

My C.V. is attached: ☐ Yes ☐ No

Additional Attachments to this Application

Attachments are to be sent as **ONE** pdf file attached to the same email as your application form. Please name the attachment file as follows: "LastName_FirstName-Attachments.pdf"

Documents included in your pdf (select all that apply):

- ☐ Post-Secondary Degrees (provide translation to English if needed)
- ☐ Full copies of precisely three (3) peer reviewed publications where authorship has been indicated
- ☐ Official documentation of all degrees awarded, transcripts of academic records, or equivalent documentation of all courses taken, and marks earned, submitted directly to the office by the registrar of every university or other institution of higher education attended. ****Note: When education was obtained at an institution outside Canada or the USA, a course-by-course evaluation of those credentials through a credential evaluation agency such as, but not limited to, World Education Services (WES) must be submitted from the evaluation agency directly to the office.**



Section 3 Personal Letter/Statement

Insert your personal letter/statement in the space provided below. Describe your reasons for seeking to qualify as a professional Clinical Chemist.



Section 4 Educational Background and Experience

University/Institution	Field of Specialization	Years Attended	With Honors?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Summarize your pre-doctoral experience relevant to Clinical Chemistry, Hematology, Microbiology, or Molecular Biology.

Employer	Type of Position	Dates

Summarize your post-doctoral experience relevant to Clinical Chemistry, Hematology, Microbiology, or Molecular Biology.

Appointments held	Type of activity (research or other)	Dates

Use the space provided below to list papers and abstracts you have published. List most recent first



Section 5 References

Please provide the names, title(s) and contact information (email and phone) of **three** referees whom you have asked to write in support of your application.

☐ I have provided these referees with the Clinical Biochemistry Confidential Referee form

	Referee #1	Referee #2	Referee #3
Name			
Title(s)			
Email			
Phone			

Section 6 Attestation and Signature

Electronic signatures are permitted.

Full Name	Signature**	Date

****By signing this document, I affirm that all of the information contained in this application is true and complete to the best of my knowledge. I agree to the distribution of the information contained herein only for the purposes of applying to the Department of Pathology & Laboratory Medicine.****

For Office Use Only:

- ☐ Application complete
- ☐ Reference Letters (x3) received
- ☐ Submitted to Fellowship Program Committee for review

Date: _____