

Resident Research Course Intake Form

Please complete the below fields and submit this form before **October 1, 2025** to the course coordinators via email – achresearchcourse@ahs.ca or by using the submit button below.

Name: _____

PGY Level: _____

Program: _____

Supervisor name: _____

Supervisor email: _____

Research Question:

Which type of study/project will this be? (If you are unsure, please check with your supervisor)

Intervention

Observational

Qualitative

Quality Improvement

Undetermined

Previous Research Experience:

Planned absences approved by your Program Director: ☐ None

Have you previously taken the TCPS2 Ethics online course? ☐ Yes ☐ No

If yes, please forward your completion certificate to course coordinators. If no, please complete and then submit prior to November 4, 2025 - <https://tcps2core.ca/welcome>

Supervisor Meetings:

To ensure engagement with your supervisor, please prebook at least 3 meetings with them.

Date of meeting prior to Research Course:

Date of first meeting during the Research Course:

Date of second meeting during the Research Course: