



KidSIM Fellowship in Simulation Education and Research

Application Form for KidSIM Fellowship Program

Name: _____

Academic Title/Status: _____

Department/Division: _____

Work phone: _____ E-mail: _____

Currently enrolled in Masters in Education degree or PhD?: Yes No

- If yes, where? _____
- If no, are you considering enrollment? Yes No
- Specify details/which program: _____

Type of application submission: Self-funded Clinically supported

- If self-funded: please list any salary support available to you

- If clinically supported: please list which department is supporting your application and who (clinical educator) will provide co-supervision.

Have you contacted **KidSIM Faculty** to request supervision of your research project?

Yes (please specify whom) No

Domestic applicants – Please send completed forms in by one of the options:

- Email scanned form to: Karly.Luca@ahs.ca
- Mail completed form to: KidSIM c/o Karly Luca
28 Oki Drive, N.W. Calgary, AB T3B 6A8

IMG applicants – Please have your sponsoring organization submit the application form directly to the PGME office at the University of Calgary for pre-approval.

- Please send the completed form to: pgmefellowships@ucalgary.ca

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Application deadline: November 30th for following July 1st start

Required supporting documentation:

All applicants:

1. Current CV
2. Letter of intent
3. 3 Reference letters

Self-funded applicants:

1. Plans for financial support (Confirmed)

Clinical applicants:

1. Letter of support from Department Chair specifying protected time (for clinical applicants only)