**Fundamentals of R Biological Scientists Virtual Workshop**

Workshop Dates: September 22, 29, October 6 and 13, 2021 at 2:00 PM Eastern Time

Location: Online

**For SCN applicants**: Complete the application form and return it, along with any additional documents required, by email to [rcadwalader@stemcellnetwork.ca](mailto:rcadwalader@stemcellnetwork.ca) **by 11:59 PM (sender's time)** Thursday, August 26, 2021

**For BioCanRx applicants:** Complete the application form and return it, along with any additional documents required, by email to [memahoney@biocanrx.com](mailto:memahoney@biocanrx.com) **by 11:59 PM (sender's time)** Thursday, August 26, 2021

**Note:** Space in this workshop is limited. All interested participants must apply to attend by completing this application form. Successful applicants will be invited to attend, and details on how to register for the workshop will be provided at that time. Note: A $500 charge will be levied to the participant’s supervisor if they fail to attend/complete all elements of the training event – see notes for details.

|  |  |  |
| --- | --- | --- |
| **APPLICANT INFORMATION** | | |
| Surname: | Given Names: | |
| Gender?:  Woman  Man  Gender Fluid / Non-Binary | | |
| Identify as Indigenous\*?  Yes  No | | |
| Person with a disability\*\*?:  Yes  No | | |
| Identify as a member of a visible minority?  Yes  No | | |
| Citizenship:  Canadian (including permanent resident)  International | | |
| Position & Year of Study:  *(i.e. MSc Student, PhD Student, Post-Doc, Research Associate, Technical staff)*: | Institution name and city: | |
| Phone Number: | Email Address: | |
| Your network affiliation: | BioCanRx | SCN |
| **SUPERVISOR INFORMATION** | | |
| Surname: | Given Names: | |
| Institution name and city: | | |
| Phone Number: | Email Address: | |

Please include the following:

* 1. Provide an overview of your current research interest (Max. 1 page).
  2. Describe your experience with the R or other programming languages (max. 1/2 page).
  3. Provide specific details on how attending this workshop will advance your research project. For example, describe any challenges you are having with acquiring, analyzing, and interpreting your datasets (max. 1 page).
  4. Describe your plans for disseminating the information learned at this workshop with others in your home lab or institute (max. 1/2 page).
  5. Provide your CV.
  6. Provide a letter of support from your current supervisor (email is sufficient) detailing how your attendance at this workshop will benefit your training, and your lab.

Letters should be e-mailed directly to [memahoney21@biocanrx.com](mailto:memahoney21@biocanrx.com) (BioCanRx applications) or [rcadwalader@stemcellnetwork.ca](mailto:rcadwalader@stemcellnetwork.ca) (SCN applications) by the **Thursday, August 26, 2021.**

Notes

Spaces are limited on this important training opportunity. BioCanRx/SCN will cover the registration costs (paid directly to the organizers) of this event for applicants who attend all sessions and complete all elements of the online content in this training event within the designated period. **For applicants that** **fail to attend all sessions or complete the course content a fee of $500 will be charged** to their supervisor to cover the costs associated with delivering this training event.

\*Indigenous; that is First Nation (North American Indian), Métis or Inuk (Inuit).

\*\*Person with a disability is a person who has long-term or recurring physical, mental, sensory, psychiatric or learning impairment and:

* Who considers themselves to be disadvantaged in employment by reason of that impairment, or
* Who believes that an employer or potential employer is likely to consider them to be disadvantaged in employment by reason of that impairment, and
* Includes persons whose functional limitations owing to their impairment may have been accommodated in their current job or workplace.