

Special Response Fund for Trainees – (Ukraine)

This form must be completed and signed by the grant holder and signed by the relevant institutional representative; this may be a Research Grant Officer or a Business or Financial Officer, for example.

Grant Holder Information

First Name	
Last Name	
Grant Holder Signature	
Application # or Funding Reference # (FRN)	

Attestation

Additional funds are requested to initiate or maintain the employment or financial support of a trainee, defined as a graduate student or postdoctoral researcher. The grant holder attests that the graduate student or postdoctoral researcher named below:

- Will participate in research activities associated with the direct costs of this grant.
- Is directly impacted* by the crisis in Ukraine.
- Is not benefiting from other tri-agency funds for the same purpose.
- Support for this individual would end or not be possible if the requested funds were not granted.

*Direct impact is defined as (check the one that applies):

□ A trainee who is currently in Canada and was expected to return to Ukraine in 2022 but cannot because of the current crisis; or

□ A trainee who cannot continue their planned course of studies or research in Ukraine because of the crisis and is now in Canada

Trainee Information

First Name					
Last Name					
Current level of Study	a. Master's student				
	b. Doctoral student				
	c. Post-doctoral researcher				

Amount Requested

Support can be requested for a period of up to 12 months, ending March 31, 2023, or until the end of the authority to use funds period of the grant, aligned with institutional guidelines for the support of trainees. The <u>maximum</u> allowable amounts for a 12-month period are:

Master's student -\$20,000 Doctoral student -\$25,000 Postdoctoral Level -\$45,000

Requested amounts will be pro-rated to reflect the expected duration of the support.

Start Date (yyyy-mm-dd)	
End Date (maximum 1 year from start date) (yyyy-mm-dd)	
Amount Requested	

Terms and Conditions

The Terms and Conditions that were issued with your original Authorization for Funding will remain in effect for any funds awarded as a result of this application.

You confirm the grant holder's continued eligibility to receive CIHR funding and agree that the funds will be used for the direct support (stipend or salary) of the aforementioned trainee, for research activities associated with the direct costs of this grant.

Name of Institutional	
Representative	
Email	
Telephone number	
Position title	
Signature	

Email this co	ompleted and	signed	application	form to	osupport-so	utien@cihr-	irsc.gc.ca.
					00.000.000		