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|  | **Affiliate Investigator Application Form**  **BC Children’s Hospital Research Institute** |
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***Application Instructions:***

*Step 1: Complete this form*

*Sept 2: Sign signature page and obtain Theme Director’s endorsement and signature*

*Step 3: Email completed application form, signature page, your CV and photo to* [*resinfo@bcchr.ca*](mailto:resinfo@bcchr.ca)Individuals who hold primary appointments at other research institutes, universities/campuses, hospitals and/or agencies, but are actively engaged in a Theme’s research program may apply for the Affiliate Investigator designation at BC Children’s Hospital Research Institute (BCCHR).Please note thatAffiliate Investigator appointments are granted only if they are considered important to the success of a Theme’s research program and have obtained the endorsement of the respective Theme Director (ie. more strategic than a collaborative research program with 1 to 2 Investigators).

***Eligibility Criteria:***

* **Significant engagement in a research program that is closely aligned with a Research Theme**. This may include the development or implementation of large-scale research projects.
* **Alignment with a Research Theme, along with endorsement by the Theme Director and Senior Executive Director,   
   Research, BC Children’s Hospital**.
* Former Investigators who have moved to positions at other locations may hold Affiliate Investigator status until their research program on the Oak Street Campus concludes (ie. when trainees graduate or funding closes).

***Responsibilities of Affiliate Investigator:***

* Active participation in a Theme within BCCHR.
* Renewal of BCCHR affiliation at the end of each one-year term.
* Adherence to BCCHR, PHSA, university and hospital policies governing the conduct of research and professional practice.

*Please refer to the “*[*BCCHR Membership General Guidelines*](https://bcchr.ca/sites/default/files/forms-membership/bcchr-membership-general-guidelines-april-2022.pdf)*” for more details.*

Please be advised that the information you provide here will appear on the [www.bcchr.ca](http://www.bcchr.ca) website for public viewing, as well as in the BC Children’s Hospital [Research Community Member (RCM) Directory](https://directory.bcchr.ca/ords/f?p=DIRECTORY:HOME:::NO:1::). By submitting this form, you are consenting to the publication of this information and registration with Research Services. If you have concerns about this, please contact [resinfo@bcchr.ca](mailto:resinfo@bcchr.ca). **Affiliate** **Investigators are expected to verify and update their personnel information in the RCM directory annually.**

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| **Applicant Information:** | | | | | | | | |
| Title: | Legal Last Name: | | | Legal First Name: | | | | Initial: |
| Indicate how you would like your name publicly listed on our website & Research Community Member Directory *(if different from above*):  Last Name:       First Name: | | | | | | | | |
| Degrees: | | | | Academic Rank and Appointment Type *(ie. Assistant Professor, Clinical Assistant Professor, etc.)*: | | | | |
| University/Academic Institution: | | Faculty: | | Academic Department: | | | Academic Division *(if applicable)*: | |
| Please indicate if you are a Healthcare Professional:  Clinician  Other *(please specify)*: | | | | Health Authority *(if applicable)*: | | | | |
| Clinical Position/Title *(if applicable)*: | | | | Clinical Department and Division *(if applicable*): | | | | |
| Hospital Site: | | | | Please indicate your primary affiliation *(ie. university, hospital, research institute, etc.)*: | | | | |
| Other Title(s) *(ie. administrative titles)*: | | | | **ORCID iD** **Number** *(required)*: | | | | |
| **Primary Address and Contact Information:** this will be included in your directory and external web profile | | | | | | | | |
| Name of Organization: | | | Room Number: | | Street Address: | | | |
| City: | | | Province: | | | Postal Code: | | |
| Primary Phone Number *(required)*: | | | Institutional Email *(required)*: | | | | | |
| Secondary Email: | | | Affiliated Websites: | | | Lab Phone: | | |
| Assistant/Administrator Name  *(if applicable)*: | | | Assistant/Administrator Phone  *(if applicable)*: | | | Assistant/Administrator Email  *(if applicable)*: | | |

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| **Theme Alignment:** | | | |
| BCCHR has 4 Research Themes. Within each Theme there are 4 Research Groups that focus on specific research interests and/or expertise.  **You** **can only align with one Theme**. However, an Affiliate Investigator can participate in **multiple Research Groups within and across different Themes**. Please select the Research Group(s) you would like to participate in, with the understanding that you are expected to meaningfully participate in all of the Research Group(s) chosen. *See more information on Themes and Research Groups at:*[*https://bcchr.ca/research/research-themes*](https://bcchr.ca/research/research-themes) | | | |
| **Check one (1) Theme:** | | | |
| **Brain, Behaviour & Development** | **Childhood Diseases** | **Evidence to Innovation** | **Healthy Starts** |
| **Select your Research Groups(s):** | | | |
| Mental Health & Behaviour | Childhood Cancer &  Blood Research | Changing Behaviours: Knowledge Discovery   to Translation | Global Health and Innovations |
| Neurodevelopmental  Disorders | Diabetes | Clinical & Community  Data, Analytics &  Informatics | Origins of Child Health and Disease |
| Pain and Stress in Child Health | Immunity in Health &  Disease | Clinical Pharmacology | Pathways to  Healthy Birth |
| Visualizing the Brain | Rare Diseases | Clinical Practice,  Outcomes & Innovation | Vaccines, Infections and Host Defenses |
| **Demonstrated Engagement in Research on the Oak Street Campus:** | | | |
| Affiliate Investigators are individuals who hold primary appointments at other research institutes, universities/campuses, hospitals and/or agencies, but have **significant engagement with the BCCHR research community on the Oak Street Campus.** | | | |
| Please describe how your current research activities on the Oak Street Campus demonstrate a level of engagement that is beyond a collaborative research program: | | | |
| Percent of dedicated/protected research time (*self-reported*):  0% - 15%  16% - 29%  30% - 69%  70% - 100% | | | |

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| **Research Information:** the information below will be included in your external web profile on [www.bcchr.ca](http://www.bcchr.ca) |
| **Research Area:** (Please use MEDLINE terms/keywords [<https://medlineplus.gov/healthtopics.html>] to describe your area of focus; this information will appear on your external web profile) |
| **Lay Summary:** (As this summary is intended for the general public, please describe your research in lay language. This will be displayed as plain text [no scientific characters] on your external web profile) |
| **Current Research Projects:** (Please include the titles and descriptions of your top 2-3 projects – maximum 500 words, 2-4 paragraphs each; this information will appear on your external web profile) |
| **Grants:** (List major grants from the past 5 years; this information will appear on your external web profile) |
| **Honours/Awards:** (This information will appear on your external web profile) |

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| **Communications Consent:** |
| Do you consent to receive electronic newsletters and notices from the Research Institute?  Yes  No  This includes:   * News, funding announcements, resources, support services and more from BCCHR and our partners * Updates and fundraising initiatives from BC Children’s Hospital Foundation * Events, workshops, conferences and programs of interest to the research community   **Privacy Statement:** BCCHR collects your name, email address, and activity (ie. opens, clicks) as authorized under section 26 (c) of the [British Columbia Freedom of Information and Protection of Privacy Act](http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/96165_00) to send electronic newsletters and notices. BCCHR uses a third party to support newsletter publishing and distribution, and track reader activity (opens, clicks, etc.). The third party vendor and its servers are located within Canada.  You may unsubscribe at any time by emailing Research Communications at [comm@bcchr.ca](mailto:comm@bcchr.ca). |

*If scanning, print, sign and scan* ***only*** *this page:*

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| **Signatures:** | | |
| *By signing below, I certify that the information provided on this application form is accurate to the best of my knowledge:* | | |
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| Applicant (Print Name) | Signature | Date |

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| **Endorsement of Applicant (to be completed by Theme Director):** | | |
| Please provide a justification as to how the applicant’s research program aligns with the Theme’s strategic goals *(2-3 sentences)*: | | |
|  |  |  |
| Theme Director (Print Name)[[1]](#footnote-1) | Signature | Date |

1. BC Children’s Hospital Research Theme Directors are as follows:

   (if there are Theme Co-Directors, you require only one Theme Director signature)

   * **Director, Brain, Behaviour & Development Theme: Dr. Evelyn Stewart**

   (contact Theme Research Manager, Marissa Gibbard at [mgibbard@bcchr.ca](mailto:mgibbard@bcchr.ca))

   * **Director, Childhood Diseases Theme: Dr. Megan Levings**

   (contact Theme Research Manager, Jeffrey Helm at [jhelm@mail.ubc.ca](mailto:jhelm@mail.ubc.ca))

   * **Co-Directors, Evidence to Innovation Theme: Dr. Ian Pike & Dr. Kishore Mulpuri**

   (contact Theme Research Manager, Claire Humphreys at [chumphreys@bcchr.ca](mailto:chumphreys@bcchr.ca))

   * **Interim Director, Healthy Starts Theme: Dr. K.S. Joseph**

   (contact Theme Research Manager, Kim Schmidt at [kim.schmidt@bcchr.ca](mailto:kim.schmidt@bcchr.ca)) [↑](#footnote-ref-1)