

# AbSPORU GRADUATE STUDENTSHIP IN PATIENT-ORIENTED RESEARCH

## APPLICATION INSTRUCTIONS

### GENERAL INSTRUCTIONS

**The Applicant (i.e., the student) must submit their completed Application Package to their home university, and not to the Alberta SPOR SUPPORT Unit (AbSPORU) directly.**

**The Applicant** should check with the faculty of graduate studies at their home university for full descriptions, application details, and **internal university deadline date(s)** for this competition. **It is the Applicant's responsibility to submit their completed Application Package to their home university by the specified internal deadline date.**

It is **the Applicant's** responsibility to ensure the Application Package is complete prior to submission to their university. No supplemental information may be provided after the deadline date. **Incomplete Application Packages will not be considered.** Failure to comply with the above instructions may deem an application ineligible.

The Applicant, and his/her Primary Supervisor where indicated, should use the space provided in the Application Form for each item of information requested. Attachments may be appended where indicated.

Please consult the Program Guide for information on eligibility. Note: Past AbSPORU Graduate Studentship Awardees are not eligible to apply.

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### APPLICATION PACKAGE

The Application Package must be submitted as a single PDF document.

- Complete all applicable sections of the Application Form and save it as a PDF.
- Append required and/or necessary attachments (including university **transcripts**) as separate PDF pages.

#### **Signatures:**

The Applicant, the Primary Supervisor, and the Institution (University) must sign and date the Application Form on Page 15.

#### **Transcripts:**

The Application Package must contain transcripts for all university-level courses. Transcripts must be up-to-date and official, or certified true copies of the official (an official transcript must include the university seal and registrar's signature). Copies may be certified by the Primary Supervisor, Department Head, or a Notary Public. Uncertified photocopies will not be accepted. Foreign transcripts must be accompanied by a certified English translation and a formal explanation of the grading system.

It is the Applicant's responsibility to ensure that all university-level transcripts are included as attachments in the Application Package. Neither AbSPORU nor the Applicant's home university will request missing transcripts.

### **Publications List / Online Bibliography:**

A publications list document and/or a link to an online bibliography (e.g. Google Scholar) must be provided in the Application Package. The Applicant may provide both. Publications contained in the online bibliography do not need to be repeated in the publications list document. The publications list document should be created as a separate PDF and attached to the Application Form.

Include published or in-press research contributions only. In-press publications are those publications that have been made available online by the publisher and are citable using DOI, which will be assigned a publication date and issue. Published or in-press publications do not include articles that are: in preparation, submitted, under revision, resubmitted, forthcoming, accepted with revisions or accepted without a DOI.

**Note: Alternative (i.e. non-traditional) research outputs may be included and described in the publications list document. The description for each alternative research output listed should be 200 words or less, and should identify the context including organizational affiliation, partners, stakeholders, and funding.**

If providing a publications list document, please follow the formatting guidelines below for listing publications. Failure to comply with these formatting instructions may deem an application ineligible.

#### **Format:**

- Full authorship order as it appears in the original publication (**Applicant's name in bold**);
- Year;
- Title;
- Publication name and volume\*;
- First and last page numbers\*;
- DOI

*\*For in-press publications, DOI will be sufficient.*

#### **Order of Publications Listed:**

Please use the following category headings:

1. **Published or in-press peer reviewed primary research articles** - (*Knowledge dissemination of experimental results*)
2. **Published or in-press peer-reviewed review articles** - (*Analysis or discussion of research previously published by others*)
3. **Published or in-press books, monographs, book chapters or contributions to a collective work**
4. **Oral presentations** - (*Presentations as an invited guest speaker or contributed talks, excludes poster presentations*)
5. **Abstracts** - (*Published or non-published abstracts from participation in peer activities such as, but not limited to, poster presentations at conferences and workshops, etc.*)
6. **Patents\*** - (*Specify if the patent was granted or is pending. The primary inventor name should appear first followed by the co-inventors, if any. See formatting example below*)
7. **Reports** - (*Research reports or reports produced for the government*)

\*Formatting example for listing patents

Inventor1. Co-inventor. Year issued or filled. Title. Country Patent number or Country application number. Date filled. Date issued or Patent pending.

## Proposal

The Proposal will consist of the following:

- Project Overview
- List of Project References
- Patient-Oriented Research Alignment

**The Proposal should be created as a separate PDF document and attached to the Application Form. See below and refer to the Program Guide for more detailed instructions.**

### A) Project Overview - (800 words or less)

Ensure that the hypothesis/research question, objectives, anticipated study design and methodological approach, deliverables, expected outcomes, and knowledge dissemination/implementation plan are described in sufficient detail for the reviewers to be able to assess the feasibility and overall merit of the proposed health-oriented research in terms of its suitability as a training opportunity. Please include description of the following:

- How principles of equity, diversity and inclusion have been considered and will be integrated in and/or addressed through the proposed research project.
- How factors and outcomes relating to sex- and gender-based analysis have been considered and will be appropriately addressed and integrated – (If not appropriate as primary outcomes, please explain why, and what considerations informed this determination).
- Any non-traditional research impacts/outcomes and measures of success that may be anticipated from the proposed Research Project (e.g. community partner research outputs).

The background information should provide the rationale and help to position the proposed health-oriented research in the context of the current state of the field and the significance of the work being proposed.

Ensure sufficient detail for the reviewers to understand how the proposed health-oriented research project will (or has the potential to) embody patient-oriented research (per Appendix A: Project Eligibility of the Program Guide).

Trainees are expected to write the Project Overview. The Project Overview should be written in general scientific language that is understandable by a broad audience.

### B) List of Project References

Only the key references related to the project description are to be listed in the box titled “**List of Project References**”. The reference list should be formatted using APA 7 – (A formatting guide is available here:

[https://owl.purdue.edu/owl/research\\_and\\_citation/apa\\_style/apa\\_formatting\\_and\\_style\\_guide/general\\_format.html](https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/general_format.html))

### C) Alignment to Patient-Oriented Research

Ensure that the principles of Patient-Oriented Research (POR) (as per the definition below) are demonstrated in sufficient detail for the reviewers to assess the Applicant’s understanding of POR and how POR is embodied in the proposed health-oriented research project. AbSPORU has operationalized the CIHR definition of patient-oriented research to clarify the minimum requirements for a Project to be considered as patient-oriented. The proposal must clearly articulate that the Project does or will do all of the following (see Appendix A of the Program Guide for detailed descriptions):

- Meaningfully engages patients (and providers) as partners appropriately through the research continuum;
- Focuses on patient-identified health priorities
- Aims to improve patient health outcomes

The benefit of the proposed research study to patients must be clearly articulated. If the Applicant and/or the Primary Supervisor has secured partnerships with patients, stakeholders, or community members, this must be included, indicating how these partners are involved and how these partnerships will help make the project successful. If the Applicant and/or the Primary Supervisor intend to obtain patient, stakeholder, or community partnerships, the strategy to obtain these partnerships must be feasible and sufficiently detailed.

**\*\*\*NEW THIS YEAR\*\*\***

**Submission of CIHR Competition Results**

If applicable/available, a copy of Applicant's results (ratings, etc.) from prior a CIHR competition application(s) relating to the proposed health-oriented research project may be submitted. Please append as a separate PDF page to the Application Form as an attachment(s).

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**SUBMISSION INSTRUCTIONS FOR REFEREES:**

**Letter of Reference**

One reference letter is required from the Primary Supervisor identified in this form. No other reference letters will be permitted or considered. The letter should include information regarding eligibility of the proposed research project. The letter should highlight the strengths and research & innovation leadership potential of the Applicant as a research trainee and future researchers (including but not limited to intellectual and motivational capacity, interpersonal and collaborative skills, and ability to generate and apply new ideas).

The Applicant is responsible to request the letter of reference from their Primary Supervisor.

**The Primary Supervisor should email the signed\* reference letter in PDF format in confidence to [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca), solely for the purpose of supporting the application for a competitive award. The reference letter must be received no later than 4:00pm MT on November 15, 2021.**

**\*\*\*NEW THIS YEAR!\*\*\***

**SPOR Network Letter of Support**

Up to five (5) awards will be reserved for Alberta-based Applicants whose Research Project will be conducted in affiliation with a [SPOR Network](#), and whom otherwise meet all eligibility, project eligibility, and overall review criteria.

Beyond the Applicants selected for the five reserved awards noted above, priority consideration will be given to other Alberta-based Applicants (among the remaining general pool of Applicants) whose Research Project will be conducted in affiliation with a SPOR Network.

One letter of support signed by the Executive Director of the affiliate SPOR Network (or their delegate) may be provided. The letter should outline 1) the scope of the relationship between the Applicant and the SPOR Network with respect to the Applicant's proposed research project, 2) how the Applicant's proposed research serves the mandate of the SPOR Network, and 3) how the SPOR Network anticipates actioning/ implementing the outcomes of the Applicant's proposed research project. **The Applicant is responsible to request the letter of reference from the SPOR Network.**

**The SPOR Network should email the signed\* reference letter in PDF format in confidence to [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca), solely for the purpose of supporting the application for a competitive award. The reference letter must be received no later than 4:00pm MT on November 15, 2021.**

*\*Note: We require a signed copy of the letter(s) and will accept electronic or scanned signatures.*

### **TRANSMISSION INSTRUCTIONS FOR UNIVERSITIES**

Universities (not Applicants) must transmit all completed Application Packages to [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca) no later than **4:00pm MT on November 15, 2021**. Please transmit by email or secure FTP download link. Each Application Package should be transmitted electronically in a single PDF format.

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### **CONTACTS AND NOTIFICATIONS:**

Successful applicants will be notified by the Alberta SPOR SUPPORT Unit no later than by February 1, 2022.

For more information contact:

Kelli Buckreus, BA, MA(IS), Associate Director

Alberta SPOR SUPPORT Unit Capacity Development Platform

Email: [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca)

Phone: (780) 293-4587

## Alberta SPOR SUPPORT Unit Studentship Award 2021 Application Form

APPLICANT INFORMATION		
First Name(s)	Initial(s)	Surname(s)/Last Name(s)
<b>Mailing Address:</b>		
Street Address		
City		
Province/State		
Postal Code/Zip Code		
If the above address is not in the province of Alberta, please provide the address of your physical presence in Alberta and describe the nature of your residence in Alberta:		
Phone/Cell Number		
Email		
<b>Applicant Confirmation:</b>		
I confirm that I have reviewed the eligibility requirements for this Program in the Program Guide:  <i>Access the program guide on our website here:</i> <a href="https://absporu.ca/capacitydevelopment/graduate-studentship/">https://absporu.ca/capacitydevelopment/graduate-studentship/</a>	<input type="checkbox"/> Applicant Confirmation <i>(check box to provide confirmation)</i>	

<b>Applicant Relationship with the Alberta SPOR SUPPORT Unit and/or Alberta Innovates:</b>	
<p>Do you have a current or prior relationship with the Alberta SPOR SUPPORT Unit, including an employment relationship, volunteer relationship, funding relationship, etc.? <i>(NOTE: Award recipients may not be an employee of the Alberta SPOR SUPPORT Unit at any time during the award period)</i></p>	<p><input type="checkbox"/> Yes   <input type="checkbox"/> No</p>
<p>If yes, describe the nature of the relationship: <i>(100 words or less)</i></p>	
<p>Do you have a current or prior relationship with Alberta Innovates, including an employment relationship, volunteer relationship, funding relationship, etc.? <i>(NOTE: Award recipients cannot hold more than one award administered through Alberta Innovates simultaneously)</i></p>	<p><input type="checkbox"/> Yes   <input type="checkbox"/> No</p>
<p>If yes, describe the nature of the relationship: <i>(100 words or less)</i></p>	
<p>Are there any real, potential or perceived conflict(s) of interest between the Applicant and the Alberta SPOR SUPPORT Unit and/or Alberta Innovates?</p>	<p><input type="checkbox"/> Yes   <input type="checkbox"/> No</p>

<p>If yes, describe the nature of the potential or perceived conflict: (100 words or less)</p>	
<p>Have you received funding from CIHR or another organization for the research project described in this application?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If yes, please provide the organization name, funding competition name, award amount, and the award start- and end-dates, and any details that may be relevant:</p>	
<p><b>Research Project Title:</b></p>	
<p>Institution presently registered (or will be registered) at for the degree program related to this application</p>	
<p>Graduate Degree Type</p>	<p>Master's Doctorate (PhD, EdD, etc.)</p>
<p>Degree Program/Discipline</p>	
<p>Are you (or will you be) enrolled in more than one degree/diploma program? <i>(*NOTE: Award recipients cannot be enrolled in more than one academic program simultaneously during the award period, with the exception of a formal joint degree program)</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Current Year of Study			
Start Date	Anticipated End Date	Graduate GPA	
<b>PRIMARY SUPERVISOR INFORMATION</b>			
Name			
Email			
Phone/Cell Number			
Institution	Faculty/ Department/ Division/ Program		
Street Address	City	Province	Postal Code
<p><b>Primary Supervisory confirmation:</b>  <i>(Check box to provide confirmation)</i></p> <p><input type="checkbox"/> I will ensure the Applicant's adherence to the terms and conditions of the award, including the fulfilment of all requirements (e.g. training and activities assigned by AbSPORU).</p> <p><input type="checkbox"/> I confirm the Applicant will not complete their thesis defense prior to the award start-date or during the award period.</p> <p><i>(NOTE: If the Applicant is selected for award and their thesis defense takes place during the award period, the remainder of the award will be withdrawn as of the last day of the month in which the thesis defense occurs.)</i></p>			

SECONDARY SUPERVISOR INFORMATION (if applicable)			
Name			
Email			
Phone/Cell Number			
Institution	Faculty/ Department/ Division/ Program		
Street Address	City	Province	Postal Code
<p><b>If the Applicant has more than one secondary supervisor, please provide the above information for them as a separate attachment</b></p>			
<p><b>Provide a completed Biographical Sketch Information form for the Primary Supervisor and (if applicable) the Co-Supervisor(s). Please attach the completed and signed Biographical Sketch form(s) and any additional pages to this application form.</b></p> <p><b>The Biographical Sketch Information form can be <a href="#">downloaded here</a>.</b></p>			

<b>APPLICANT: CURRENT AND COMPLETED POST-SECONDARY PROGRAMS</b>			
University/Institution	Country	Supervisor (if applicable)	
Program and Degree/Diploma	Start-date	End-date	Completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
University/Institution	Country	Supervisor (if applicable)	
Program and Degree/Diploma	Start-date	End-date	Completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
University/Institution	Country	Supervisor (if applicable)	
Program and Degree/Diploma	Start-date	End-date	Completed? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If providing information on more than three programs, please attach as a separate page. Attach all university-level transcripts.</b>			

<b>APPLICANT: UNIVERSITY ACADEMIC ACHIEVEMENTS (PRIZES, HONOURS, AWARDS)</b>	
Award Title	
Awarded By:	
Category:	Year Won:

Award Title	
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Awarded By:	
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Category:	Year Won:
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Award Title	
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Awarded By:	
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Category:	Year Won:
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**If providing information on more than three achievements, please attach as a separate page.**

**APPLICANT'S PUBLICATIONS**

Will you be providing a publications list document?  Yes  No

If providing a publications list document, attach it to this Application Form as a separate page. You may also provide a link to your online bibliography (e.g. Google Scholar) in the space below. Publications contained in the online bibliography do not need to be included in the publications list document.

Link to online bibliography:

APPLICANT'S RELEVANT WORK/RESEARCH EXPERIENCE			
Organization/Company		Position	
		<input type="checkbox"/> Volunteer <input type="checkbox"/> Paid	
Supervisor Name (if applicable)	Start-date	End-date	Location
Organization/Company		Position	
		<input type="checkbox"/> Volunteer <input type="checkbox"/> Paid	
Supervisor Name (if applicable)	Start-date	End-date	Location
Organization/Company		Position	
		<input type="checkbox"/> Volunteer <input type="checkbox"/> Paid	
Supervisor Name (if applicable)	Start-date	End-date	Location
<b>If providing information on more than three experiences, please attach as a separate page.</b>			

**APPLICANT'S WORK / RESEARCH / LIVED EXPERIENCE STATEMENT**

Describe how your work, research, **and/or lived experiences** have 1) influenced your academic career path to-date, 2) will support your ability to undertake the research project described in this application, and 3) will shape your future academic and career goals. *(500 words or less)*

**NON-CONFIDENTIAL RESEARCH PROJECT SUMMARY**

**The Research Project Summary and Overview included in this application was written by whom?**  
*(Please indicate which of the following options best applies)*

- Student     Supervisor     Combination of Student and Supervisor
- Other: \_\_\_\_\_

**Project Summary** (*300 words or less*)

This is a brief, non-confidential summary of the opportunity, the activities to be performed during the term of a possible award, and the anticipated outcomes . Do not include information that may be considered confidential as this summary may be published by the Alberta SPOR SUPPORT Unit and/or Alberta Innovates.

## APPLICANT'S CAREER DEVELOPMENT PLAN

Describe your career goal(s) and development plan. What types of career options are you considering? *(300 words or less)*

How does your program of study support progression towards your career goals? *(300 words or less)*

## APPLICANT'S PERSONAL STATEMENT

Explain your motivation for pursuing advanced research training in health in Alberta and why you should be considered for this award. Please include description of relevant **lived experience factors**. *(500 words or less)*

## RESEARCH TRAINING ENVIRONMENT

In collaboration with your Primary Research Supervisor, discuss the training environment and your trainee role in the proposed Research Project. Describe in specific detail the resources available to support the trainee's research and the broad training opportunities the environment provides. Outline the benefit for the trainee training in this environment, highlighting the facilities, and other personnel the trainee will have the opportunity to interact with. Detail the role of the trainee in the proposed Research Project and how it links to the Primary Supervisor's research program and/or research group. *(500 words or less)*

**PLEASE PROVIDE THE FOLLOWING (A, B, AND C) AS SEPARATE PAGES ATTACHED TO THIS FORM**

**A. PROJECT OVERVIEW** (800 words or less)

Provide an overview of the proposed health-oriented Research Project, including the main objectives, anticipated study design, deliverables, anticipated outcomes, and a knowledge dissemination/implementation plan. Please describe how principles of equity, diversity and inclusion may be integrated. Please describe how factors and outcomes relating to sex- and gender-based analysis will be appropriately addressed and integrated – (If not appropriate as primary outcomes, please explain why).

*(“Project Overview” means the scope of work to be performed and funded through this Application.)*

**B. LIST OF PROJECT REFERENCES**

List the key references related to your research Project.

**C. PATIENT-ORIENTED RESEARCH ALIGNMENT** (800 words or less)

Provide a detailed description of how the proposed health-oriented research Project embodies the principles of Patient-Oriented Research (POR), as defined by ABSPORU. Please refer to the definition provided in Appendix A of the Program Guide and in the Application Instructions.

**PRIMARY SUPERVISOR LETTER OF REFERENCE**

One reference letter is required from the Primary Supervisor identified in this form. No other reference letters will be permitted or considered. **The reference letter must be received no later than 4:00pm MT on November 15, 2021.**

**The Primary Supervisor should email the signed reference letter directly to [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca)**

*The reference letter should highlight the strengths and research & innovation leadership potential of the Applicant as a research trainee and future researchers (including but not limited to intellectual and motivational capacity, interpersonal and collaborative skills, and ability to generate and apply new ideas).*

**SPOR NETWORK LETTER OF SUPPORT**

**\*\*\*NEW THIS YEAR!\*\*\***

Up to five (5) awards will be reserved for Alberta-based Applicants whose proposed Research Project will be conducted in affiliation with a **SPOR Network** and whom otherwise meet all eligibility, project eligibility, and overall review criteria. Beyond the Applicants selected for the five reserved awards noted above, priority consideration will be given to other Alberta-based Applicants (among the remaining general pool of Applicants) whose Research Project will be conducted in affiliation with a SPOR Network.

One letter of support signed by the Executive Director of the affiliate SPOR Network (or their delegate) may be provided. **The letter of support must be received no later than 4:00pm MT on November 15, 2021.**

**The SPOR Network should email the signed reference letter directly to [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca)**

Will a Letter of Support from an affiliate SPOR Network be provided?  Yes  No

## APPLICATION PACKAGE CHECKLIST

The Applicant must complete this checklist before submitting their Application Package to their home university:

- Application Form completed and signed by Applicant and Primary Supervisor
- Project Overview, List of Project References, and Patient-Oriented Research Alignment attached
- Official Transcripts (all years of completed undergraduate and, if applicable, graduate work) attached
- Supervisor Biosketch form(s) completed and attached
- Letter of Reference requested from Primary Supervisor
- (if applicable) Letter of Support requested from affiliate SPOR Network
- (if applicable) Copy of Applicant's results (ratings, etc.) from prior CIHR competition application(s) relating to the proposed research project

## TRANSMISSION INSTRUCTIONS FOR UNIVERSITIES:

Universities (not Applicants) must transmit all completed Application Packages to [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca) no later than **4:00pm MT on November 15, 2021**. Please transmit by email or secure FTP download link. Each Application Package should be transmitted electronically in a single PDF format.

For more information contact:

Kelli Buckreus, BA, MA(IS), Associate Director  
 Alberta SPOR SUPPORT Unit Capacity Development Platform  
 Email: [kelli.buckreus@ucalgary.ca](mailto:kelli.buckreus@ucalgary.ca)  
 Phone: (780) 293-4587

## SIGNATURES

\_\_\_\_\_  
 Applicant (Student)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Supervisor

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Institution (University)

\_\_\_\_\_  
 Date

**Please carefully read all instructions and include all necessary attachments. It is the Applicant's responsibility to ensure the Application Package is complete prior to submission to their university. Incomplete Application Packages will not be considered.**

**The Applicant must submit their completed Application Package to their home university, and not to the Alberta SPOR SUPPORT Unit (AbSPORU) directly. It is the Applicant's responsibility to submit their completed Application Package to their home university by the specified internal deadline date.**

**CONSENT AND DECLARATION**

By submitting this Application, including any supporting documentation, I, the Applicant, legally represent that:

1. I provide explicit consent to the disclosure of the information identified as nonconfidential by the Alberta SPOR SUPPORT Unit and/or Alberta Innovates in their sole discretion;
2. I have read and understand the Program Guide;
3. I meet all the eligibility requirements as set out in the Program Guide;
4. I am not aware of any real, perceived or potential conflicts of interest, and will advise the Alberta SPOR SUPPORT Unit if such a conflict arises during the Application process if my Application is selected for award.
5. I agree and consent to the Alberta SPOR SUPPORT Unit contacting the individual(s) or organization(s) or Project partner(s) listed in this Application as part of the evaluation of my Application;
6. All information contained in this Application, including but not limited to the Project and supporting documentation, is true and accurate;
7. I acknowledge that failure to provide true and accurate information in this Application will result in automatic rejection of the Application;
8. Submission of this Application does not obligate the Alberta SPOR SUPPORT Unit and/or Alberta Innovates to invest in funding me and/or my Project, and the Alberta SPOR SUPPORT Unit has sole and absolute discretion in making the investment determination and appeals on any basis will not be entertained; and,
9. If this Application is approved, Alberta Innovates and the Applicant's Institution, on behalf of the Applicant must execute an Investment Agreement, which provides additional contractual terms and conditions governing the Investment made by Alberta Innovates, to the Project before Alberta Innovates will advance funds.

**INFORMATION SHARING CONSENT**

To help inform our decision making and demonstrate value to our stakeholders, the Alberta SPOR SUPPORT Unit may acquire third-party assistance to administer surveys or analyze information. All information shared between the Alberta SPOR SUPPORT Unit and third-party vendors is bound to confidentiality agreements. Reporting or dissemination of Applicant information in the public domain is limited to aggregate information only. For clarity, 'aggregate' means removal of personal identifiers such as names, locations and addresses of Applicants and employees, and combining such information with that of other Applications submitted by Applicants.

**FOR OFFICE USE ONLY**

Date Received:	Application Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Notes:
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