

## 2025 CANCER RESEARCH TRAINING PROGRAM AWARD COMPETITION

**Application Deadline: APRIL 28, 2025, AT 4pm ADT**

**DESCRIPTION:** Trainees who are part of the Beatrice Hunter Cancer Research Institute [Cancer Research Training Program](#), undertaking cancer research at recognized institutions in Atlantic Canada, and who meet the eligibility requirements are invited to apply for the CRTP 2025 Spring Award Competition.

[Click Here for 2025 CRTP Award Terms of Reference](#)

[Click Here for Complete 2025 CRTP Award Eligibility Requirements](#)

**Receipt of the Intent to Apply form must be received by the BHCRI office to apply:**

Postdoctoral fellows may receive funding if, on September 1, 2025, they have not completed more than 4 years of postdoctoral study. PhD candidates (including those that transferred from an MSc program) if, on September 1, 2025, they have not completed more than 5 years of graduate study. PhD candidates may apply for postdoctoral funding but must have successfully defended their thesis prior to the start date. MSc students if, on September 1, 2025, they have not completed more than 2 years of graduate study. Please note: A trainee may not receive more than two CRTP awards. A maximum of two trainees may be funded per supervisor to assist as many research locations as possible and ensure a breadth of trainees. In any competition, the number of applications from each supervisor is limited to four. A supervisor may not have more than two trainees funded at the same time.

**Monetary Value of the Traineeship Award: \$17,500. Tenable over 12 months, starting September 01, 2025**

A supervisor may supplement the value of the traineeship award from their grant support, and/or trainees may receive support from other awards while receiving the CRTP stipend, but the total amount received from awards must adhere to the following guidelines: i) The total combined amount for all awards may not exceed \$40,000 for a graduate student (MSc or PhD), ii) The total combined amount for all awards may not exceed \$70,000 for a post-doctoral fellow. In all cases, the maximum amount paid by CRTP cannot exceed the original CRTP approved amount.

If granting the full CRTP award of \$17,500 will cause the total combined amount of awards to exceed the thresholds of \$40,000 for a graduate student (MSc or PhD) or \$70,000 for a post-doctoral fellow, BHCRI will top up the total combined amount with the CRTP amount until the respective thresholds of \$40,000 for graduate students (MSc or PhD) or \$70,000 for post-doctoral fellows are met.

Applications for CRTP Traineeship Awards will be reviewed by the Scientific Review Committee and ranked numerically.

**Reviewers span a broad range of research and applications should be written so they are understood by all reviewers.**

The Chair of the Scientific Review Committee will present this ranked list, together with reviewers' comments, to the BHCRI Training Committee for funding consideration. Supervisors can be asked to be members of future Scientific Reviews.



# BEATRICE HUNTER Cancer Research Institute

Evolving Cancer Research in Atlantic Canada

## 2025 CANCER RESEARCH TRAINING PROGRAM AWARD COMPETITION APPLICATION DEADLINE: APRIL 28, 2025, 4pm ADT

A SINGLE PDF. FILE (**UNSCANNED**) OF THE APPLICATION {INCLUDING THE SUPERVISOR(S) AND CO-SUPERVISOR(S)} CV MUST BE EMAILED to [admin@bhcri.ca](mailto:admin@bhcri.ca) BY APRIL 28, 2025, 4pm ADT

### PROJECT TITLE

**Project Title:**

#### CATEGORY OF AWARD

If you expect to transfer from Masters to PhD before September 01, 2025, select the PhD award category. Your application will be reviewed with other PhD applicants.

Masters (MSc, MAsc, MHI, etc.) - If you plan to transfer to a PhD program during the duration of the CRTP award, please list expected date of transfer:

Doctoral (PhD or equivalent)

Postdoctoral (post-PhD or -MD) - Please enter date last doctoral degree was received (PhD or MD):

Other - please specify:

#### AREA OF CANCER RESEARCH

Discovery/fundamental

Clinical/translational

Population/epidemiology

Psychosocial/behavioural

Other - please specify:

Precision Medicine\* Applicants must show relevance to precision medicine as part of their project description

Targeted Cancer(s):

### BIOGRAPHICAL INFORMATION

#### APPLICANT PERSONAL DETAILS

**SURNAME**

**GIVEN NAME(S)**

<b>UNIVERSITY/HOSPITAL MAILING ADDRESS</b>			
<b>INSTITUTION</b>		<b>DEPARTMENT</b>	
<b>STREET</b>	<b>CITY</b>	<b>PROVINCE</b>	<b>POSTAL CODE</b>
<b>TELEPHONE NUMBER</b>	<b>FAX NUMBER</b>	<b>APPLICANT E-MAIL</b>	
<b>APPLICANT'S CURRENT POSITION. PLEASE INCLUDE MONTH AND YEAR OF PROGRAM START</b>			
Start Date:			
<b>SUPERVISOR(S)</b>			
<b>NAME</b>	<b>INSTITUTION</b>	<b>EMAIL</b>	<b>PHONE NUMBER</b>
<b>NAME</b>	<b>INSTITUTION</b>	<b>EMAIL</b>	<b>PHONE NUMBER</b>
<b>APPLICANT SIGNATURE</b>			
<p>I hereby agree to abide by BHCRI regulations governing 2025 CRTP Awards as described in the <a href="#">Terms of Reference</a>. I consent to having my contact information stored in a database used for disseminating future BHCRI notices, including the newsletter. I will notify BHCRI if I receive another award. <i>Applicants please note: By signing this application, you authorize BHCRI to provide a copy of your lay summary and/or scientific abstract and/or application to the funding partners outlined in the approval letter, should your application be successful. Lay summary information may also be posted on BHCRI's website and/or social media networks. In addition, BHCRI will provide the project title, applicant name(s), award amounts, partner organization name(s), if applicable, and lay summary to the Canadian Cancer Research Alliance, an alliance of Canada's major cancer research funders as part of the Canadian Cancer Research Survey (CCRS). For information on the survey, please visit <a href="http://www.ccra-acrc.ca/">http://www.ccra-acrc.ca/</a>. Additionally, precision medicine applications will be kept on file and the above information reported to the Terry Fox Research Institute.</i></p>			
Signature of Applicant			

Date

I will be submitting the optional [self-identification form](#). The form may be downloaded from the website and sent to [admin@bhcri.ca](mailto:admin@bhcri.ca) separately (please do not combine the form with the CRTP application). Please note that the Self-Identification form is confidential and is not seen by the Scientific Review Committee. Only the aggregate information is used by the BHCRI office for statistical purposes. If you have submitted a form in the past, please do not submit another one.

I will not be submitting a self-identification form.

### ACADEMIC TRAINING/PROFESSIONAL EXPERIENCE

#### TRANSCRIPTS (ONLY ONE COPY OF EACH APPLICABLE TRANSCRIPT IS REQUIRED)

PLEASE **SUBMIT ORIGINAL TRANSCRIPTS RELEVANT TO THIS APPLICATION**. official copies of each applicable transcript must be emailed directly from the institution to [admin@bhcri.ca](mailto:admin@bhcri.ca) or scanned and emailed directly from the proposed supervisor's institutional email address to [admin@bhcri.ca](mailto:admin@bhcri.ca). Please do not mail transcripts to the BHCRI office.

TRANSCRIPT REQUIREMENTS: CURRENT PROGRAM AND LAST FULL PROGRAM COMPLETED. PDF APPLICANTS SHOULD INCLUDE THEIR PHD TRANSCRIPTS. GRADUATE APPLICANTS SHOULD INCLUDE THEIR CURRENT PROGRAM (MASTERS OR PHD), ANY PREVIOUS GRADUATE PROGRAM, AND UNDERGRADUATE TRANSCRIPTS.

PLEASE LIST YOUR APPENDED TRANSCRIPTS HERE:

#### UNDERGRADUATE TRAINING

DATE FROM	DATE TO	DEGREE/MAJOR	INSTITUTION
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#### GRADUATE TRAINING (CURRENT AND/OR PREVIOUS)

DATE FROM	DATE TO	DEGREE/TOPIC	SUPERVISOR	INSTITUTION
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#### RELEVANT PROFESSIONAL EXPERIENCE (ATTACH ADDITIONAL PAGES, IF NECESSARY)

DATE FROM	DATE TO	POSITION & TOPIC	SUPERVISOR	INSTITUTION
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**THESIS TITLE (s) IF APPLICABLE**

or N/A

**LIST PEER-REVIEWED ARTICLES AND ARTICLES IN PRESS OR SUBMITTED.** PLEASE DESCRIBE THE ROLE OF THE APPLICANT IN THE PUBLICATION FOR ARTICLES SUBMITTED, INCLUDE ACKNOWLEDGEMENT FROM THE EDITOR.

or N/A

ADDITIONAL INFORMATION REGARDING THE SIGNIFICANCE OF THE JOURNAL OR OTHER PUBLICATION, SUCH AS IMPACT FACTOR OR RANKING OF JOURNAL IN YOUR FIELD IS PERMISSIBLE AND ENCOURAGED AND MAY BE HELPFUL TO MEMBERS OF THE SCIENTIFIC REVIEW COMMITTEE

**SCIENTIFIC PRESENTATIONS, IF APPLICABLE**

or N/A

**OTHER PRESENTATIONS, IF APPLICABLE**

or N/A

**RELEVANT DISTINCTIONS AND AWARDS RECEIVED, INCLUDING DATES HELD**

**ACADEMIC REFERENCE LETTERS (ORIGINAL LETTERS ONLY)**

APPLICANTS MUST SUBMIT **TWO ACADEMIC REFERENCE LETTERS ALONG WITH THEIR APPLICATION**. ONE REFERENCE LETTER SHOULD BE FROM A CURRENT SUPERVISOR. IF THERE ARE TWO (CO) SUPERVISORS, BOTH MAY PROVIDE REFERENCES; HOWEVER, **ONE** REFERENCE FROM A REFEREE WHO IS NOT A CURRENT SUPERVISOR IS ALSO REQUIRED (IT IS SUGGESTED THAT THE PROPOSED SUPERVISOR SERVE AS A REFEREE). CONSIDER

PRONOUN USE (OR USE THEY/THEM/THEIR) WHEN REFERRING TO AN APPLICANT. Reference letters must be emailed directly from referee's Institutional email address to [admin@bhcri.ca](mailto:admin@bhcri.ca) (letters will not be accepted from Gmail, Hotmail, etc.) PLEASE DO NOT MAIL LETTERS TO THE BHCRI OFFICE.

REFEREE NAME	INSTITUTION	EMAIL ADDRESS	TELEPHONE NUMBER

**RESEARCH ETHICS**

REQUIRED:

IN YOUR PROPOSAL, SELECT THOSE YOU ARE PLANNING TO USE:  ANIMALS  HUMANS  HUMAN BLOOD  N/A

IF YES TO ANY OF THE ABOVE, A COPY OF THE ETHICS APPROVAL WILL BE REQUIRED BY BHCRI PRIOR TO RELEASE OF FUNDS.

IF YES, PLEASE PROVIDE A SUMMARY DESCRIBING THE ETHICAL CONSIDERATIONS OF THE PROJECT AND WHY THEY ARE NEEDED TO COMPLETE THE RESEARCH (I.E. ANIMAL ENDPOINTS, TREATMENTS/INJECTIONS, DIET, CONSENT FORMS, SURVEYS, ETC). (SEPARATE PAGE, MAX 125 WORDS, DOUBLE-SPACED, 12 PT. FONT, 1 INCH MARGINS).

PLEASE NOTE: \*IF APPLICABLE, EVIDENCE OF ETHICS APPROVAL MUST BE RECEIVED BEFORE FUNDING IS RELEASED TO SUCCESSFUL APPLICANTS.

**DATA ANALYSIS, INCLUDING STATISTICAL METHODOLOGY**

PLEASE PROVIDE A DESCRIPTION OF THE DATA ANALYSIS OR STATISTICAL METHODOLOGIES THAT WILL BE USED TO ANALYZE DATA OBTAINED THROUGHOUT THE PROPOSED PROJECT (I.E. MEASURING STATISTICAL SIGNIFICANCE, BIOINFORMATICS METHODS, NUMBER OF REPEATED MEASURES NECESSARY, JUSTIFICATION FOR NUMBER OF ANIMALS/HUMANS PER GROUP, ETC). (SEPARATE PAGE, MAX 200 WORDS, DOUBLE-SPACED, 12 PT. FONT, 1 INCH MARGINS). IF THIS IS NOT REQUIRED, PLEASE EXPLAIN THE REASON WHY (SEPARATE PAGE, MAX 125 WORDS, DOUBLE-SPACED, 12 PT. FONT, 1 INCH MARGINS).

**RESEARCH PROJECT DESCRIPTION**

DESCRIBE YOUR RESEARCH PROJECT

**MAXIMUM FOR GRADUATE STUDENTS: SEPARATE PAGES, MAX 950 WORDS (APPROXIMATELY 3 PAGES)**

**MAXIMUM FOR POSTDOCTORAL STUDENTS: SEPARATE PAGES, MAX 1300 WORDS (APPROXIMATELY 4 PAGES)**

ALL SHOULD BE DOUBLE-SPACED, 12 PT. FONT, 1 INCH MARGINS.

REFERENCES MUST BE INCLUDED BUT DO NOT COUNT TOWARD THE PAGE TOTAL.

A LIST OF ABBREVIATIONS MAY BE INCLUDED, IF APPLICABLE. **FIGURES OR TABLES MAY BE INCLUDED** (MAXIMUM OF 4 SINGLE FIGURES OR TABLES. FIGURES MAY NOT INCLUDE MULTIPLE PARTS. MAXIMUM OF 4 PAGES (ONE FIGURE OR TABLE WITH RELATED TEXT PER PAGE). FIGURE OR TABLE LEGEND MAY ONLY PERTAIN TO THE FIGURE OR TABLE ITSELF. REFERENCES, FIGURES AND LIST OF ABBREVIATIONS DO NOT COUNT TOWARD THE PROJECT PAGE TOTAL).

**ANY MATERIAL IN EXCESS OF THESE LIMITS WILL BE REMOVED AND NOT CONSIDERED.**

**PLEASE INCLUDE THE FOLLOWING HEADINGS WITHIN YOUR PAGE LIMIT:**

1. LINK TO CANCER
2. RESEARCH QUESTION/AIMS/OBJECTIVES
3. METHODS
4. APPLICANT'S ROLE IN PROJECT
5. TIMELINE FOR APPLICANT'S WORK

**RELEVANT PAST EXPERIENCE & FUTURE PLANS**

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DESCRIBE PAST EXPERIENCE THAT IS RELEVANT TO RESEARCH (CANCER OR OTHERWISE) AND FUTURE PLANS TO CONTINUE IN THE AREA OF CANCER RESEARCH (EXPECTED CAREER ADVANCEMENT IN TERMS OF YOUR PROJECT AND CHOSEN SUPERVISOR). PLEASE INCLUDE AN EXPLANATION FOR ANY INTERRUPTION OF STUDY OR TRAINING (SEPARATE PAGE, MAX 250 WORDS, DOUBLE-SPACED, 12 PT. FONT, 1 INCH MARGINS).

**GENERAL PUBLIC SUMMARY**

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GIVE A GENERAL SUMMARY OF YOUR RESEARCH, WRITTEN SO THAT A GRADE 10 STUDENT COULD READ AND UNDERSTAND YOUR WORK. THIS SUMMARY IS NOT MEANT FOR A SCIENTIFIC AUDIENCE. THE FOLLOWING STRUCTURE SHOULD BE FOLLOWED: 1) WHAT IS THE PROBLEM? 2) WHY IS THIS IMPORTANT. RECOMMENDATION: HAVE FAMILY MEMBERS REVIEW YOUR LAY SUMMARY

BY SIGNING THE APPLICATION, THE APPLICANT AND SUPERVISOR CONSENT TO HAVING THE LAY SUMMARY POSTED ON THE BHCRI SOCIAL MEDIA SITES (WEBSITE, FACEBOOK, TWITTER), USED IN MEDIA RELEASES AND COMMUNICATIONS, AND SHARED WITH APPLICABLE FUNDING PARTNERS. (SEPARATE PAGE, MAX 250 WORDS, DOUBLE-SPACED, 12 PT. FONT, 1 INCH MARGINS). [CLICK HERE FOR GUIDELINES FOR WRITING LAY SUMMARIES.](#)

PLEASE ENTER YOUR LAY SUMMARY READABILITY SCORE (THE FLESCH-KINCAID GRADE LEVEL SHOULD BE 10 OR LESS):

**APPLICANT'S STIPEND OR SALARY SUPPORT**

**CURRENT FUNDING**

DESCRIBE THE SOURCE(S) OF YOUR CURRENT STIPEND OR SALARY FUNDING, IF ANY

OR NONE . IF NONE, PLEASE EXPLAIN

**APPLICATIONS TO OTHER AGENCIES\***

**FUNDING AGENCY**

**AWARD TITLE**

**APPLICATION DATE**

FUNDING AGENCY	AWARD TITLE	APPLICATION DATE



FUNDING AGENCY	AWARD TITLE	APPLICATION DATE

\*IT IS EXTREMELY BENEFICIAL FOR THE FUTURE RESEARCH CAREERS OF APPLICANTS TO OBTAIN AN AWARD FROM NATIONAL AND/OR INTERNATIONAL GRANTING AGENCIES. FOR THIS REASON, CRTP-FUNDED TRAINEES ARE ENCOURAGED TO SEEK EXTERNAL FUNDING THROUGHOUT THEIR TRAINEESHIP TENURE, WHERE THERE ARE OPPORTUNITIES.

**SUPERVISOR(S) CV & STATEMENT OF SUPPORT  
TO BE COMPLETED BY SUPERVISOR**

**SUPERVISOR(S) CV**

ATTACH SUPERVISOR(S) CV (5 PAGE LIMIT). IF MORE THAN ONE SUPERVISOR, INCLUDE CV'S FOR BOTH. PLEASE ENSURE THAT THE FOLLOWING ITEMS ARE INCLUDED:

- A) PUBLICATIONS FROM LAST 5 YEARS,
- B) RECORD OF GRADUATE/POST-GRADUATE SUPERVISORY EXPERIENCE INCLUDING ANY PREVIOUS CRTP TRAINEES (LIST THEIR CANCER-RELATED PUBLICATIONS AND MAJOR CANCER-RELATED PRESENTATIONS DURING THAT TIME,
- C) FUNDING SOURCES.

A COPY OF THE SUPERVISOR(S) CV MUST BE SENT WITH THE ELECTRONIC COPY OF THE APPLICATION. **Any pages in excess of the 5-page limit will be removed and not considered as part of the application package.**

**SUPERVISOR(S) STATEMENT OF SUPPORT (NOT A LETTER OF REFERENCE)**

PLEASE DESCRIBE:

- A) SOURCE AND DURATION OF OPERATIONAL FUNDING FOR THIS PROJECT,
  - B) TRAINING ENVIRONMENT, INCLUDING FACILITIES AND ADDITIONAL PERSONNEL THAT WILL CONTRIBUTE TO THE SUCCESSFUL COMPLETION OF THE PROPOSED PROJECT (INCLUDING COLLABORATIONS),
  - C) APPLICANT'S ROLE IN RESEARCH PROJECT,
  - D) THE ROLE OF THE SUPERVISOR AND CO-SUPERVISOR, IF APPLICABLE,
  - E) INDICATE SUPERVISOR'S BHCRI MEMBERSHIP STATUS: SENIOR SCIENTIST, SCIENTIST or ASSOCIATE MEMBER
- (SEPARATE PAGE, 250 WORDS OR LESS, SINGLE-SPACED, 12 PT. FONT, 1 INCH MARGINS)

**SUPERVISOR SIGNATURE**

BHCRI-funded trainees are required to attend at least 80% of CRTP curriculum throughout their traineeship tenure. Supervisors are

encouraged to attend all sessions but are required to attend two per year per funded trainee, for funding to continue. If trainee attendance drops below 80%, the trainee and supervisor will be advised that the trainee is being placed on 3 months' probation. Should the attendance record not increase to 80% or greater at the end of 3 months, funding will be canceled. Extenuating circumstances will be taken into consideration.

A final report that emphasizes the linkage to cancer must be submitted to the BHCRI Administrative Office at the end of their term. Abstracts and publications must clearly show cancer relevance and, where appropriate, be published in journals relevant to cancer. BHCRI-funded trainees are encouraged to seek external funding throughout their CRTP traineeship tenure. If requested, before the start of funding, the trainee, supervisor and a representative from the BHCRI Training Committee may meet to confirm the requirements of the program.

Trainees are required to take part in one cancer-related experiential training opportunity of their choice per year. Failure of the trainee to meet these obligations will cause the supervisor to be ineligible to apply for CRTP funding for the next 12 months

BHCRI encourages applications be prepared by the trainee and edited by the supervisor. Please check here if that is the case. If not, please explain:

I confirm that all resources are available for the duration of the CRTP award and agree to abide by these guidelines, if approved.

*By signing this application, I authorize BHCRI to provide a copy of the lay summary and/or scientific abstract and/or application to the funding partners outlined in the approval letter, should the application be successful, and to the Canadian Cancer Research Alliance, an alliance of Canada's major cancer research funders as part of the Canadian Cancer Research Survey (CCRS). The survey gathers cancer research funding data annually from organizations within the governmental and voluntary/charitable sectors. Projects are classified in a variety of ways (research area, cancer site, etc.) and reports are issued for public and member use. The evidence base provided by the survey is used to inform individual and joint planning and facilitate coordination among the CCRA members. For more information, see <http://www.ccra-acrc.ca/>. For more information, see <http://www.ccra-acrc.ca/>. I agree that the lay summary can be shared via BHCRI's social media platforms (including website, Facebook, Twitter/X) and shared with relevant funding partners.*

Signature of Supervisor

Date