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| **CAMO Community Oncology Bursary** | **2025 Application Form** |
| **Submission deadline**Rotations taking place between January & June |Application deadline: July 31, 2024Rotations taking place between July & December | Application deadline: December 2, 2024 |

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| **Resident Information** |
| First Name:       | Last Name:       |
| Mailing address:       |
| City:       | Province:       | Postal Code:       |
| Tel:       | Email:       |

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| **Resident Status** |
| PGY4 [ ]  | PGY5 [ ]  | Institution:       |
| Supervisor name:       | Supervisor email:       |

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| **Community Rotation** |
| Location of rotation:       |
| Start date:       | End date:       |
| What do you expect to gain with this opportunity:      |
| How will this influence your career:      |

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| **Document Checklist** |
| Letter of support for rotation & approval by supervisor [ ]  |
| 1-page proposal [ ]  |
| Resident CV [ ]  |
| Are you a CAMO member | Yes [ ]  | No [ ]  |
| Is your supervisor a CAMO member | Yes [ ]  | No [ ]  |

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| **Disclaimer and Signature** |
| I hereby understand and agree that any bursaries made as a result of this application will be subject to the CAMO terms and conditions. |
| Signature of resident | Date       |
| Signature of program director | Date       |
| Signature of supervisor | Date       |