

Background

Applicant Information

(Carefully read the instructions before completing this form)

1. Applicant Information

Your User Profile information appears below however this section should indicate where the research described within this application is taking place (change as necessary). NOTE: Your User Profile is always considered your current mailing address. The address listed here will be used to advise you of the outcome of this competition only.

- a. Applicant Name Title Dr Mr Ms Prof
- b. Institution
- c. Department
- d. Address 1
- e. Address 2
- f. Address 3
- g. Address 4
- h. Country
- i. City Province Postal Code
- j. Phone Ext Fax
- k. e-Mail Address
- l. Designation

2. Conference Information

Indicate the full title of the conference. Indicate if the Financial Institution responsible for the administration of research award accounts is different than your Research Institution, and if so, select the institution name from the lookup list. Enter the amount of funds requested from CCS as well as your total travel costs. Enter the conference start and end dates. NOTE: Applications will only be accepted for conference dates within 6 months following the funding start date.

- a. Conference Title
- b. Is Financial Institution the same as the Research Institution? (Please select Yes or No) Yes No
- c. If No, provide Financial Institution name
- d. Conference Start Date End Date
- e. Amount of Funds Requested Project Cost
- f. Grant category
 Travel Award
- g. Is this application being submitted in French? (Note that all review panels are conducted in Yes No English.)
- h. Review Panel
 Travel Awards Panel

i. **Keywords/Technical terms. Provide up to a maximum of ten specific keywords or descriptive technical terms/methodologies that best describe the scientific and technical aspects of your project. NOTE: Enter one keyword or technical term per line.**

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3. Contacts

Select Contact Type "FO" for financial officer, and provide the name and address of the financial officer responsible for the administration of research award accounts at the given institution.

a. Financial Officer

Name

Title

Institution

Department

Address 1

Address 2

Address 3

Address 4

Country

City

Province

Postal Code

Telephone

Fax

E-Mail Address

SAMPLE

Applicant info

4. Applicant curriculum vitae

Attach your CV in PDF format. It should include the following information:

- Education and Training
- Awards
- List of publications (Provide the names of all authors, the full title and the full journal citation. Organize publications under clear headings (i.e. refereed publications, reviews, manuscripts under review, manuscripts submitted. For each publication listed, provide details of your contribution. Highlight publications relevant to this submission with an *. Do not include non-peer-reviewed publications.)
- Poster/Oral Presentations (Provide the names of all authors, the full title of the presentation and the conference information.)
- Professional Activities (This can include teaching and editorial experience, community outreach activities, memberships)
- Other information that is relevant to the application

NOTE: For the file name, please use the following format: [lastname_firstname-CV]. The CCS is not a member organization of the Common CV Network, therefore the Common CV should not be used due to Common CV use restrictions.

SAMPLE

Publications

5. Number of publications

Indicate the number of publications for each type listed.

- a. Published
- b. Submitted
- c. Posters
- d. Presentations

6. Reprints

You may submit a maximum of two reprints, preprints or submitted manuscripts. If you are not a first author, include a brief statement indicating your specific contribution. NOTE: For the file name, please use the following format: [lastname_firstname-reprints].

SAMPLE

Presentation

7. Conference information

7.a. Conference details

Indicate the title of the conference, as well as the conference location and the dates of when the conference starts and ends.

- a. Conference title:
- b. Conference location:
- c. Conference dates Starting: Ending:
(mm/dd/yyyy):

7.b. Copy of abstract and, if available, presentation acceptance

Submit a copy of your abstract and, if available, presentation acceptance in PDF format. Provide the abstract as submitted to the conference (i.e. Tables and figures can be included if permitted by the conference.). NOTE: For the file name, please use the following format: [lastname_firstname-abstract].

8. Presentation

8.a. Presentation details

Include the full title of the paper or poster to be presented. Include the names and institutions of co-authors, if applicable, in the list below.

- a. Title of paper or poster to be presented
- b. Have you been accepted to make a presentation? Yes No
- c. If accepted, what is the presentation type? (Select one or more)
- Oral presentation Workshop presentation Panel presentation
 Poster presentation Other
- d. Co-authors (if applicable):

8.b. Project summary

Provide a brief summary of the work to be presented and its relevance to cancer (maximum of 4200 characters, including spaces). Note that the character count may be different when copying text from Word due to formatting.

8.c Justification statement

Please provide a brief statement justifying the benefit of attending this conference, symposium or meeting (maximum 2100 characters, including spaces). Note that the character count may be different when copying text from Word due to formatting.

8.d References

Provide a list of references cited within the application. A standard reference style is recommended (e.g. first author, article title, journal title, date of publication, volume, issue, location (pagination)).

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Budget

	Line Item	Req. Amount	Others	Total
1.	Travel Costs			
	Instructions : Distribute your travel costs by the type of expense and indicate the amount requested from CCS, and indicate funding amounts from other sources for the CCS eligible expense categories. The total equals the total expected travel costs. Please note that CCS eligible expenses include: 1) Conference registration fees, including abstract submission; 2) Accommodations; and 3) Transportation only.			
	1. Accommodations			
	2. Conference Registration			
	3. Transportation (specify) []			
	Totals			

SOURCE OF FUNDS

	Line Item	Req. Amount	Others	Total
1.	Travel Funds			
2.	Sources-Other funding requested/expected			

Biographical information

11. Biographical information

While completion of this section is mandatory, responses will be strictly confidential and will not be shared with the review panel. Aggregated and anonymized data will be used for program administration, statistical reporting and communications purposes only.

Preferred pronoun

He/His

She/Her

They/Their

Prefer not to respond

Citizenship

Language(s) spoken

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Tracking

12. Research tracking information

12.a. Research focus

Responses are to be limited to the scope of the proposed research for the duration of the proposed term. This information will not be used as a part of the scientific review of the application. Select the research focus of the proposal.

I. SECTION I - Research focus (select ONE only)

- Biomedical Research
 Clinical Research
 Health Services/Systems Research
 Social, Cultural, Environmental and Population Health

12.b. Research subject

Select the research subject(s).

II. SECTION II - Research subject (select ONE or MORE)

Patients/Study Population

- Adult
 Pediatric
 Adolescents & Young Adults

Patient Tissue

- Adult
 Pediatric
 Adolescents & Young Adults

Model System

- Mouse
 Drosophila
 C. elegans
 Zebrafish
 Yeast
 Other

Cell System

- hESC
 Tumour Initiating Cell
 Non-embryo-derived stem cells (eg. iPS cells)

12.c. Cancer site relevance

Select a maximum of 3 cancer sites where the research will be most relevant. Indicate the degree of relevance (percentage). The total should equal 100%. Only use the Details description field to describe the site if you have selected Other as a site. Note: Do not enter a % sign with your percentage, only enter the number.

III. Section III - Cancer site relevance

Cancer site relevance	Percentage	Details

12.d. Common Scientific Outline (CSO)

Select a maximum of 3 codes which best describe the research. Full details of the Common Scientific Outline can be found at the International Cancer Research Portfolio website (<https://www.icrpartnership.org/cso>).

IV. Section IV - Common Scientific Outline (CSO)

Biology

- 1.1 Normal functioning
 1.2 Cancer initiation: alterations in chromosomes
 1.3 Cancer initiation: oncogenes and tumour suppressor genes
 1.4 Cancer progression and metastasis

- 1.5 Resources and infrastructure

Etiology

- 2.1 Exogenous factors in the origin and cause of cancer
- 2.2 Endogenous factors in the origin and cause of cancer
- 2.3 Interactions of genes and/or genetic polymorphisms with exogenous and/or endogenous factors
- 2.4 Resources and infrastructure related to etiology

Prevention

- 3.1 Interventions to prevent cancer: personal behaviors (non-dietary) that affect cancer risk
- 3.2 Dietary interventions to reduce cancer risk and nutritional science in cancer prevention
- 3.3 Chemoprevention and other medical interventions
- 3.4 Vaccines
- 3.5 Complementary and alternative prevention approaches
- 3.6 Resources and infrastructure related to prevention

Early Detection, Diagnosis and Prognosis

- 4.1 Technology development and/or marker discovery
- 4.2 Technology and/or marker evaluation with respect to fundamental parameters of method
- 4.3 Technology and/or marker testing in a clinical setting
- 4.4 Resources and infrastructure related to detection, diagnosis and prognosis

Treatment

- 5.1 Localized therapies – discovery and development
- 5.2 Localized therapies – clinical applications
- 5.3 Systemic therapies – discovery and development
- 5.4 Systemic therapies – clinical applications
- 5.5 Combinations of localized and systemic therapies
- 5.6 Complementary and alternative treatment approaches
- 5.7 Resources and infrastructure related to treatment and the prevention of recurrence

Cancer Control, Survivorship and Outcomes Research

- 6.1 Patient care and survivorship issues
- 6.2 Surveillance
- 6.3 Population-based behavioral factors
- 6.4 Health services, economic and health policy analyses
- 6.5 Education and communication research
- 6.6 End-of-life care
- 6.7 Research on ethics and confidentiality
- 6.8 Historical code - no longer used
- 6.9 Resources and infrastructure related to cancer control, survivorship and outcomes research

Release form

13. Release Form

By completing this page you certify that the information contained in this application is true and that you have read the regulations regarding the Travel Award.

On condition that

- you are the first author of data being presented
- the information contained in this application is true and that you have read the regulations and eligibility regarding the Travel Award.
- You hereby agree to abide by the CCS regulations if you are granted this award

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Supervisor

14. Supervisor

13.a. Supervisor

This section has been completed by the applicant based on information given when designating a supervisor. Confirm these entries by clicking Save and continue. If this information is incorrect, exit this screen and ask the applicant to correct the supervisor information that has been given.

Last name
First name
Department
Institution

13.b. Areas of expertise

Please provide 10 keywords or phrases encompassing both scientific disciplines and technological aspects that best describe your areas of research expertise.

Keyword/Technical terms

13.c. Publications

Include a list of your five most significant publications in the last five years. Include the full journal citation.

13.d. Reference letter

The reference letter must be on official letterhead, with your signature, and should include the following information regarding the candidate: start and completion dates of MD/PhD (if applicable); in your experience, their rank amongst their peers; their productivity, initiative and independence, their ability to express ideas and communicate scientific findings, their impact on the program and why they are well-positioned to succeed with this program; the potential of the candidate to become a leader in cancer research; their commitment to cancer research; the candidate's role in your research program/environment; and details of other travel funds, including source and amount (if applicable). NOTE: For the file name, please use the following format: [applicant-name_your-name_supervisor].