

## 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 proposal will take 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    | <input type="radio"/> Dr | <input type="radio"/> Mr | <input type="radio"/> Ms | <input type="radio"/> 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. Project Information

The title entered when the application was created is indicated. Please avoid typing in ALL CAPS. In addition, ensure the end date of your project is updated.

- |   |                           |                          |  |
|---|---------------------------|--------------------------|--|
| a. Project Title  |                           |                          |  |
| b. Is Financial Institution the same as the Research Institution? (Please select Yes or No)   | <input type="radio"/> Yes | <input type="radio"/> No |  |
| c. If No, provide Financial Institution name  |                           |                          |  |
| d. Project Start Date   | End Date                  |                          |  |
| e. Amount of Funds Requested  | Project Cost              |                          |  |
| f. Type of application. Note: maximum 1 application allowed per PI/Co-PI  |                           |                          |  |
| <input type="radio"/> Initial Application   |                           |                          |  |
| g. Do applicants confirm that there is no substantive (more than 50%) overlap with any pending application (including those at the abstract or Letter of Intent submission stage) to any other CCS Research program as of October 15, 2020?   | <input type="radio"/> Yes | <input type="radio"/> No |  |
| h. Indicate the number of years of support requested (up to 5)  |                           |                          |  |
| i. Is this application being submitted in French? (Note that all review panels are conducted in English.)   | <input type="radio"/> Yes | <input type="radio"/> No |  |
| j. The following special calls are available within the Emerging Scholar Award funding envelope. Please select at least ONE. Refer to the Emerging Scholar Award program description page on <a href="http://cancer.ca/research">cancer.ca/research</a> for more information about the special funding calls. |                           |                          |  |
| <input type="checkbox"/> Emerging Scholar Award (Alberta)   |                           |                          |  |
| <input type="checkbox"/> Emerging Scholar Award (British Columbia)  |                           |                          |  |
| <input type="checkbox"/> Emerging Scholar Award (Manitoba)  |                           |                          |  |
| <input type="checkbox"/> Emerging Scholar Award (New Brunswick)   |                           |                          |  |

- 
- Emerging Scholar Award (Newfoundland and Labrador)
  - Emerging Scholar Award (Nova Scotia)
  - Emerging Scholar Award (Ontario)
  - Emerging Scholar Award (PEI)
  - Emerging Scholar Award (Quebec)
  - Emerging Scholar Award (Saskatchewan)
  - Emerging Scholar Award (Prevention)
  - Emerging Scholar Award (Survivorship)

SAMPLE

**3. Participants**

Enter any Co-Applicant, Additional Author and Collaborator information as applicable to your application. Inclusion of Co-PIs is not permitted for this award. Additional authors who will be supported through the ESA grant must be part of the PI's immediate research team. Refer to the Application Guide for description of participant roles and eligibility requirements.

Provide full addresses, including department name/affiliation for each participant. Use the lookup feature and enter their e-mail address in the field provided as the search criteria. The form will be auto-populated with their contact information as it appears in their user profile. If they do not have a profile, enter the details as required.

CVs must follow the required format outlined in the Application Guide. CVs are not required from collaborators. Instead, letters of collaboration must be uploaded.

NOTE: Changes to the applicant list after the LOI deadline are permitted, but must be provided to the CCS as they are determined.

## a. Additional Author

Name

Title

Institution

Department

Address 1

Address 2

Address 3

Address 4

Country

City

Province

Postal Code

Telephone

Fax

E-Mail Address

## b. Co-Applicant

Name

Title

Institution

Department

Address 1

Address 2

Address 3

Address 4

Country

City

Province

Postal Code

Telephone

Fax

E-Mail Address

## c. Collaborator

Name

Title

Institution

Department

Address 1

Address 2

Address 3

Address 4

Country

City

Province

Postal Code

Telephone

Fax

E-Mail Address

## d. 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. Principal Investigator CV

Attach an up-to-date, abbreviated version of your CV in PDF format. Consult the Application Guide for complete instructions, including the required format.

NOTE: For the file name, please use the following format:[lastname\_firstname-CV].

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.

### 5. Justification for career interruptions

Describe any career interruptions or delays that may have impacted your academic career and research productivity. Please include the start and end dates of each period described (yyyy/mm). If not applicable, please indicate this in the form. Your justification should not exceed 1250 characters, including spaces.

### 6. Application and Career stage

This section is mandatory and plays no part in the review or funding of an application. The data is used for statistical and communication purposes only.

Please indicate below if this is:

- |   |                           |                          |
|---|---------------------------|--------------------------|
| Your first application for a research grant to the Canadian Cancer Society              | <input type="radio"/> Yes | <input type="radio"/> No |
| Your first application for a research grant specifically in the area of cancer research | <input type="radio"/> Yes | <input type="radio"/> No |
| Your first application for a research grant as an independent investigator              | <input type="radio"/> Yes | <input type="radio"/> No |

Please indicate your current career stage (please select one of the three options):

- New/early career investigator: Any applicant who, at the time of registration, assumed his/her first independent academic position (e.g., faculty appointment) no more than 5 years ago (60 months).
- Mid-career investigator: Any applicant who, at the time of registration, assumed his/her first independent academic position (e.g., faculty appointment) 5-15 years ago.
- Senior investigator: Any applicant who, at the time of registration, assumed his/her first independent academic position (e.g., faculty appointment) more than 15 years ago.

## Certificates

### 7. Certificates required

#### 7.a. Biohazard/Biosafety

Indicate if certificates will be required. Certificates will be requested at the time of funding.

- a. Does your project require a biohazard certificate?  Yes  No
- b. If yes, list the name of institution(s) from where the certificate(s) will be obtained.

List of institutions

#### 7.b. Animal care

Indicate if certificates will be required. Certificates will be requested at the time of funding.

- a. Does your project require animal care certificates?  Yes  No
- b. If yes, list the name of institution(s) from where the certificate(s) will be obtained.

List of institutions

#### 7.c. Ethics

Indicate if certificates will be required. Certificates will be requested at the time of funding.

- a. Does your project require ethics certificates?  Yes  No
- b. If yes, list the name of institution(s) from where the certificate(s) will be obtained.

List of institutions

#### 7.d. Human samples

Indicate if certificates will be required. Certificates will be requested at the time of funding.



## Public summary

### 9. Need for project

What need – in research or health care – will be addressed by this project (i.e. what is the rationale)? (maximum 500 characters, including spaces). Note that the character count may be different when copying text from Word due to formatting.

### 10. Goal of project

What is the goal of this project – what are you hoping to achieve? (maximum 500 characters, including spaces). Note that the character count may be different when copying text from Word due to formatting.

### 11. Project description

How will you achieve this (reminder: please use nontechnical language)? (maximum 500 characters, including spaces). Note that the character count may be different when copying text from Word due to formatting.

### 12. Future impact

How do you think this project could/will ultimately have an impact on the cancer community (including researchers, patients, families, policy, and the public at large, as relevant)? (maximum 650 characters, including spaces). Note that the character count may be different when copying text from Word due to formatting.





**16.b. Impact on career development**

Describe how the Emerging Scholar Award will impact your career development and how it will enable you to become a future leader in cancer research in Canada and internationally. Describe immediate benefits that would become available as a direct result of the funding (i.e. how the award will help build research capacity within your team, provide career development opportunities and mentorship for you and your trainees etc.). Statement must not exceed 4200 characters, including spaces. Note that the character count may be different when copying text from Word due to formatting.

SAMPLE

## Proposal

### 17. Response to LOI reviewer feedback

#### 17.a. Response to LOI reviewer feedback

Applicants have the opportunity to offer a response or indicate what modifications have been made as a result of LOI feedback. This response must not be more than 4200 characters (including spaces) in length. Note that the character count may be different when copying text from Word due to formatting.

#### 17.b. LOI reviewer reports

Attach the original, complete version of the unabridged reviews from the LOI panel review generated from EGrAMS in PDF format. Do not re-format or alter the original PDF reviews in any way. NOTE: For the file name, please use the following format: [lastname\_firstname-LOI\_reviews].

### 18. Table of Contents

OPTIONAL: Include a brief table of contents to help guide the reviewer through the proposal.

### 19. Proposal

Provide a scientific proposal (maximum of 21,000 characters, including spaces) clearly stating the following points. Consider feedback received during the LOI stage when developing your full proposal.

- a. aim(s) of the project. Provide a compelling rationale for the hypothesis by putting your proposed work in context of previous work done in the area of research. Proposed aims must be within the scope of the five-year timeline and budget of the grant. Overly ambitious aims are discouraged.
- b. experimental design, methods and analysis. While preliminary data is not a requirement, it may be included. When preliminary data generated by the research team is not available, the underlying logic or rationale behind the proposed methodology must be clearly articulated. Reference supporting as well as conflicting (if any) scientific data relevant to your proposal. Present alternate plans in case the primary methods are not successful. In addition, and importantly, sex, gender, diversity (plus other intersectionalities (SGBA+)) must be thoughtfully considered, when applicable.
3. relevance of the proposed research to cancer. Articulate the degree to which the proposed research could ultimately impact cancer control and enhance the quality of life for people living with and beyond cancer.

Note that the character count may be different when copying text from Word due to formatting. To insert special

characters, you must use Alt codes or the special character tool in EGrAMS and not Symbol font.

## 20. Sex, gender and diversity

### 20.a. Sex, gender and diversity considerations

Recognizing the variable impacts of cancer on different populations and demographics within Canadian society, CCS expects that sex, gender and diversity dimensions (plus other intersectionalities (SGBA+)) will be factored into research design, analysis and dissemination of findings. Please provide a response for each question, and we urge that you consider and embed these dimensions into your proposal, when applicable.

Is sex, as a biological variable, taken into account in the research design, methods, analysis and interpretation, and/or dissemination of findings?  Yes  No

Is gender, as a sociocultural factor, taken into account in the research design, methods, analysis and interpretation, and/or dissemination of findings?  Yes  No

Are diversity considerations (e.g. conditions, expressions and experiences of different groups identified by age, education, sexual orientation, parental status/responsibility, immigration status, Indigenous status, religion, disability, language, race, place of origin, ethnicity, culture, socio-economic status and other attributes) taken into account in the research design, methods, analysis and interpretation, and/or dissemination of findings?  Yes  No

### 20.b. Sex, gender and diversity considerations

Describe how sex and/or gender and/or diversity dimensions (plus other intersectionalities (SGBA+)) will be considered in your research proposal. If you select 'No' for one or more questions in section 20a., explain why sex and/or gender and/or diversity are not applicable in your research proposal.

Your response must not exceed 4200 characters. Note that the character count may be different when copying text from Word due to formatting.

## 21. Career development plan

Provide a career development plan that includes:

- a. your career goals, both short- and long-term, taking account of previous training and research experience to date and career stage
- b. steps you will take to achieve your goals and the anticipated challenges or barriers that must be overcome
- c. timeline and metrics that will define success in reaching your goals

Your career development plan should not exceed 8400 characters (including spaces), or roughly one full page, single spaced. Note that the character count may be different when copying text from Word due to formatting.

**22. Mentorship plan**

Provide a two-fold plan that describes the mentorship resources you have access to as an early career researcher, as well as the mentorship and training strategies that you will implement to cultivate the growth of your own research team. Consult the Application Guide for required information.

Your mentorship plan should not exceed 8,400 characters (including spaces), or roughly 1 1/2 pages, single spaced. Note that the character count may be different when copying text from Word due to formatting.

**23. Host Institution’s Commitment and Support**

Upload a one-page letter of commitment and support from your Host Institution. Consult the Application Guide for instructions. The letter included in the LOI application may be updated to ensure all the required items are provided and, in particular, to address reviewer feedback specific to the Host Institution’s commitment and support.

**24. Research team and environment**

Describe the roles and responsibilities of the members of the research team (including Co-Applicants, Additional Authors and Collaborators) who will be involved in the project. Outline the specific aspect(s) of the project each member will be responsible for, including a rationale for their inclusion, as well as a description of the research environment where the work will take place. Equity, diversity and inclusion should be considered in the rationale of the team composition and in the designated roles within the team, but specifics (i.e. personal identifiers) should not be disclosed in the application.

Your research team and environment description should not exceed 4200 characters (including spaces), or roughly one full page, single spaced. Note that the character count may be different when copying text from Word due to formatting.

**25. Research team contributions**

List each research team member (both those named on the grant as a Participant and any others not named), and indicate the % of the project work to be completed by each individual. The total % should add to 100, do not add a % sign in the percent of project work field. Research team member contributions can be indicated to 1 decimal place, as appropriate.

Participant	Percent of the project work



- c. Is there any Intellectual Property which has been filed that is directly related to the technology or project, or materials or reagents used therein?  Yes  No
- d. If Yes, please describe, including ownership and/or assignment.

SAMPLE

**Budget**

Description	2021	2022	2023	2024	2025	Total
<b>DIRECT EXPENSES</b>						
<b>Program Expenses</b>						
1	<b>Supplies and Expenses</b>					
2	<b>Salaries and Wages</b>					
<b>Total Program Expenses</b>	0.00	0.00	0.00	0.00	0.00	0.00
<b>Other Expenses</b>						
1	<b>Professional Development/ Buy-out Time</b>					
<b>Total Other Expenses</b>	0.00	0.00	0.00	0.00	0.00	0.00
<b>Equipment</b>						
1	<b>Permanent Equipment</b>					
<b>Total Equipment</b>	0.00	0.00	0.00	0.00	0.00	0.00
<b>TOTAL DIRECT EXPENSES</b>	0.00	0.00	0.00	0.00	0.00	0.00
<b>TOTAL EXPENDITURES</b>	0.00	0.00	0.00	0.00	0.00	0.00



Budget summary for Emerging Scholar Awards - 2021

7/8/2020

Description	2021	2022	2023	2024	2025	Total
<b>Program Expenses</b>						
Supplies and Expenses	0.00	0.00	0.00	0.00	0.00	0.00
Salaries and Wages	0.00	0.00	0.00	0.00	0.00	0.00
<b>Total for Program Expenses</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
Professional Development/ Buy-out Time	0.00	0.00	0.00	0.00	0.00	0.00
Permanent Equipment	0.00	0.00	0.00	0.00	0.00	0.00
<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>

SAMPLE

## Other funding

### 32. Summary of other funding applied for and received

List all grants currently being applied for, pending, about to be submitted and all grants received, for the entire period covered by this application, for the Principal Investigator and each Co-Principal Investigator. Your documentation should include a list followed by the abstracts/summaries, as submitted in the original application for funding, for all grants/applications listed and should be submitted in PDF format. For pending grant applications with similar titles, please include a statement explaining overlap, or lack thereof. Consult the Application Guide for complete instructions, including the correct format. If there are no pending grants to list, indicate by including N/A in the Pending grants section. Applications with missing other funding information or abstracts will be considered incomplete.

NOTE: For the file name, please use the following format: [lastname\_firstname-other\_funding]

### 33. Other funding confirmation

- The applicants confirm that the attached list contains all required information, including the percentage overlap for each grant and the abstracts as submitted in the original application for funding, as described in the Application Guide.

SAMPLE

## Review panel

### 34. Panel

Selected Panel

Emerging Scholar Awards Panel

### 35. Reviewer recommendation

Applicants must suggest the names of at least 3 (5 if submitting application in French) impartial reviewers with the necessary expertise to critically evaluate the application and with whom you do NOT collaborate.

Name	Department	Institution	Phone no.	E-mail address	Areas of expertise

### 36. Reviewer exclusions

Applicants may suggest individuals they prefer NOT be contacted as potential reviewers (panel members and/or external reviewers). The reason for exclusion (e.g. collaborator, colleague, competitor) should be given. NOTE: any exclusions you list will not be viewable to the panel members.

Name	Reason for exclusion

## Biographical information

### 37. 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

Language(s) spoken

Citizenship

SAMPLE

## Tracking

### 38. Research tracking information

Responses are to be limited to the scope of the proposed research for the duration of the proposed term. This information is used solely for statistical/reporting purposes and will not be used as part of the scientific review of the application. Select the research focus of the proposal.

#### 38.a. Research focus

Responses are to be limited to the scope of the proposed research for the duration of the proposed term. This information is used solely for statistical/reporting purposes and will not be used as 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

#### 38.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)

#### 38.c. Cancer site relevance

Select a maximum of 4 cancer sites where the research will be most relevant. Indicate the degree of relevance of the research to the selected cancer site in terms of percentage (%). Only include cancer sites with at least 25% relevance; 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

#### 38.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

SAMPLE

## Release form

### 39. Release form

The CCS depends on donor dollars to fund its grants. Applicants must declare their willingness to allow CCS to provide minimal details of their grant to potential donors/partners. For successful investigators, the grantee must declare their understanding that CCS will post competition results (PI, HI, title, value of grant, lay summary) on our website and potentially include a lay summary of the progress and impact of the research in our reports to donors/the public, press releases, social media or other communications.

On condition that:

- the specified information will be shared by CCS only with potential donors/partners and for the sole purpose of obtaining additional funding for CCS's grant competitions.
  - potential donors/partners will be required to declare conflict of interest, and sign a confidentiality agreement before the specified information is released to them by CCS.
  - it will be held confidential by them and not released to other parties, and will be returned to CCS or destroyed if the decision is not to fund.
  - all information released may be retained by the potential donors/partners if it decides to fund the application, and may be used by the donor/partner in its funding announcements and other communications.
- I acknowledge the sharing of the information specified with potential donors/partners and if successful in the competition, CCS will announce the grant and may publish research impacts (described above).



**Head of Department**

**40. Head of Department/Dean confirmation**

This section can only be completed by the Head of the applicant's research department. If the project is to be carried out by the Head of the Department the application must instead be confirmed by the Dean. As the Head of Department/Dean your online acknowledgement indicates that you are aware of the contents of the application being submitted. Answer the question below, then click on Save to complete your confirmation.

I confirm that I am aware of the contents of the application being submitted.

Yes  No

Name of the Head of Department or Dean

Title

Research Institution

Financial Institution

Date


SAMPLE

**Executive authority - research host****41. Executive authority of the host research institution**

This section can only be completed by an executive authority of the Host Institution within which the research will be conducted. As the Executive Authority your online acknowledgement indicates that you have read and understood the Terms of the Host Institution/CCS Agreement. Answer the question below, then click on Save to complete your confirmation.

I confirm that I have read and understood the Host Institution / CCS Agreement and agree to abide by the terms.  Yes  No

Name of the Executive Authority - research host

Title

Research Institution

Financial Institution

Date


SAMPLE

**Executive authority - financial host****42. Executive authority of the host finance institution**

This section can only be completed by an executive authority of the Institution within which the funds will be administered. As the Executive Authority your online acknowledgement indicates that you have read and understood the Terms of the Host Institution/CCS Agreement. Answer the question below, then click on Save to complete your confirmation.

I confirm that I have read and understood the Host Institution / CCS Agreement, and  Yes  No  
agree to abide by the terms.

Name of the Executive Authority - financial host

Title

Research Institution

Financial Institution

Date


SAMPLE

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**References****43. References**

<b>Name</b>	<b>Relationship to you</b>	<b>Department</b>	<b>Institution</b>	<b>Status</b>

SAMPLE

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## Post submission publications

### 44. Post submission publications

Publication lists included in this section prior to submission will be removed. This section should only be used after you have submitted your application. Attach a PDF document of your acceptance e-mail/letter for newly accepted publications. You may update this attachment at any time after you've submitted your application, up until the panel meeting. NOTE: For the file name, use the following format [lastname\_firstname\_publications\_yyyymmdd], where yyyymmdd is the current date.

SAMPLE