



2024 CARO-CROF Pamela Catton Summer Research Studentships

Name:_	Tel	Telephone:	
_	(Please Print)	(area code – number)	
e-mail a	address		
Addres	s (during school year)		
	(please pi	rint)	
		(postal code)	
Univers	sity:	Class Year:	
Which	cancer centre (in order of preference: 1,2,3, etc):	
Alberta Ontario Ontario Ontario Ontario Ontario Nova S Quebec Quebec Quebec Which April May June July	Columbia: Vancouver Edmonton Elmonton Elmonton		
	ations are to be submitted to Mary Hooey (Mary.Hoolarch 8, 2024. The Selection Committee will notify the		
Date:	Signature:		
APPLIC	CATION CHECKLIST (Submit in one PDF):		
	Letter of recommendation		
	Medical School Academic transcript (copy is accept Curriculum vitae (CV) A 500 word personal statement explaining your inte		

Within 30 days of completion of the studentships, the candidates are required to send a report describing their experiences to Mary Hooey (Mary.Hooey@uhn.ca).