

2024-2025 CASL-CLF CLINICAL FELLOWSHIP APPLICATION FORM

Goal of Fellowship

The purpose of the Canadian Association for the Study of the Liver (CASL) – Canadian Liver Foundation (CLF) Fellowship program is to support the study and the clinical management of liver diseases through advanced training of fellows in clinical hepatology and hepatology research.

Terms of Award

Clinical Fellowships are for a period of **one year**.

The Clinical Fellowship is intended to provide income to the recipient throughout their hepatology fellowship.

The award may NOT be used to cover administrative costs for the host institution where the fellowship will be taking place, nor administrative costs at the institution of the applicant's current sponsor/mentor.

The applicant may request an award of **up to \$75,000.** The application must include an outline of how the funds will be used, including any employer obligations as per CRA regulations.

Canadian citizens, landed immigrants, and permanent residents will receive first consideration. The Canadian Association for the Study of the Liver (CASL) reserves the right not to review applications that do not respect the above requirements. The applicant must provide evidence of the likelihood of practicing in Canada following their fellowship, as the intent of this funding is to further the treatment of liver disease within Canada. **The application for fellowship should explicitly address this issue.**

General Guidelines

The fellow's host institution accounting office must submit a statement of expenditures related to the fellowship within 60 days of the end of the fellowship.

An interim progress report must be submitted by fellowship holders 6 months after the start date of the fellowship to the Canadian Association for the Study of the Liver (CASL).

A brief final report must be submitted by fellowship holders within 60 days of the end of the fellowship term. This progress report should note objectives met during the fellowship and highlight successes and challenges or barriers encountered in the accomplishment of the goals set out in the fellowship application.

A fellowship recipient who has not submitted a satisfactory progress report and/or final report to the Canadian Association for the Study of the Liver will be barred from submitting a grant or fellowship proposal to CASL and CLF in future competitions. This bar may only be lifted upon receipt of satisfactory progress and/or final report(s).

Instructions

- 1. Use the application form as a cover page. Answer all questions by print or type.
- 2. Include additional information and provide signatures as requested.
- 3. Include separate pages for all additional information using one-inch margins. Put your name (last name, first name) in the upper right-hand corner of each page.
- 4. Do not use fonts smaller than 10-point type. Items may be single-spaced, but please make the presentation as user-friendly to the reviewers as possible.
- 5. Assemble the application in the order listed in the Required Documents section. Clearly label each piece of additional information. Complete all sections.
- 6. Referees may email reference letters directly to the CASL office at casl@hepatology.ca using "Reference Letter for [Applicant Name]'s Clinical Fellowship Application" as the subject line of their message
- 7. Please adhere to the stated page limits.

Access to any Publications

Fellowship recipients are required to make every effort to ensure that any peer-reviewed publications created during their fellowship are freely accessible through the Publisher's website (Option #1) or an online repository as soon as possible and in any event within six months of publication (Option #2).

An electronic version of peer-reviewed publications should be submitted to the Association as soon as they are available. CASL and CLF need to be acknowledged as a granting agency in all publications and presentations resulting from work during the fellowship.

See page 3 for full application.

2024-2025 CASL-CLF Clinical Hepatology Fellowship Application

CC Email Address (if applicable)

Applicant's Degree(s) and Year(s) granted

Applicant Information
General Information Applicants and fellowship supervisors must <u>both</u> be CASL members. By checking the boxes below, you are acknowledging that you <u>both</u> have current CASL memberships.
□ Applicant is a CASL member□ Fellowship Supervisor is a CASL member
If you are not a member, <u>click here</u> to sign up before applying.
Expected Fellowship Start Date:
Please Note: The Fellowship will normally commence on July 1 of the year following the application. The Association will make payments directly to the fellow's institution, to then be paid out as per the terms of the Fellowship. Fellowships starting on dates other than July 1 will be accepted but start dates should be expressly noted in the fellowship application to allow for expedient payment.
If at any point in time, the recipient needs to delay the fellowship, a request must be made in writing to the Canadian Association for the Study of the Liver. NOTE: additional funding will not be provided for the additional time taken.
Applicant's Prefix, First and Last Name
Email Address

Current Position Appointment Date (month/year)

Address			
City, Province, Postal Code	and Country		
Office Telephone	Fax Number		
Applicant's Citizenship Sta	tus in Canada		
porting Institution and Fel	lowship Supervi	sor Information	
Name of Supporting Institu	ution		
Institution Address			
Province		Country	
Supervisor's Prefix, First ar	nd Last Name		
Supervisor's Address			
Supervisor's City, Province	, Postal Code an	d Country	
Supervisor's Office Telepho	 one	Fax Number	 Email Addre

Requir	ed Documents		
	abstracts, or presentations Candidate's Statement — applicant of the proposed Clinical Program Description curriculum, including mon pages). Inclusion of a mor Letter of Departmental State Chair of the proposed train	Statement of applicant's career plans and training program (1 page). ion – The training institution must submit thly schedule of training and patient care on the schedule in tabular format is encourage of the schedule of training and patient care on the schedule in tabular format is encourage of the schedule in the schedule from the schedule in the schedule from the schedule from the schedule from the schedule from the applicant and supervisor (1 page).	d the potential benefit to the a detailed description of the responsibilities (maximum: 2 aged. the Department or Program
-	llowing letters may be sub ffice at <u>casl@hepatology.c</u>	mitted as part of the application packag <u>a</u> :	ge, or emailed directly to the
	their sponsorship of the ap Letter from Current Super confirming their support required during the Fellow	visor – The applicant's current supervisor of the applicant, and intention to continu	/mentor must submit a letter nue providing mentorship as
Note: `	_	cate that the applicant meets the eligibili in this application is accurate to the best	•
Signatu	ure of Applicant	Name	Date
 Signati	ure of Supervisor	Name	

Email your completed application and all documents to casl@hepatology.ca by **October 15, 2023.**