



Clinician Investigator Program

Letter of Intent

Applicant

Last Name:	First Name:	Middle Name:
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Residency Information

Program/Current PGY Level/Program Director:		
	PGY	
Proposed CIP years:		

Project Information

Preliminary Project Title:
MSc/MEd/PhD Program:
Principle Research Supervisor/Have they supervised MSc/PhD trainees before:

The above mentioned Resident's intention to take a 2-year leave from Clinical Residency to obtain a research degree has been discussed with me prior to submission. To the best of my knowledge, this individual has satisfied an acceptable level of performance as reflected by their ITER's, and thus I am supportive of this application.

Signature(Program Director): _____

Date: _____

Signature(Applicant): _____

Date: _____

Return this form to: Nicole Sutton, Program Assistant, CIP
2-76 Zeidler Ledcor Building
University of Alberta Hospital
By Email at: PgCIP@ualberta.ca