

2025 Departmental Awards Application Form

Due Date: Wednesday, June 18, 2025, 11:59pm

Please submit your application form along with your CV and transcripts from the last two years of full-time studies in ONE PDF file to pharm.sci@utoronto.ca.

Student Name: _____

Supervisor(s): _____

Degree program: ☐ MSc ☐ MScPhm ☐ PhD Date of first registration in program (month/year): _____

Thesis title: _____

Field of study: ☐ Clinical, Social & Administrative Pharmaceutical Sciences
☐ Biomolecular Sciences

Are you a Canadian Citizen, Permanent Resident or Protected Person?* ☐ Yes ☐ No

**For OSOTF/OSOTFII awards, you MUST complete the [SGS Financial Need Assessment Form](#) and submit along with this application.*

Please check only if your research is relevant to the following topics (check all that apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> Community Pharmacy | <input type="checkbox"/> Drug Delivery | <input type="checkbox"/> Oncology |
| <input type="checkbox"/> Health Outcomes / Services ^a | <input type="checkbox"/> Drug Discovery | <input type="checkbox"/> Idiosyncratic Drug Reactions |
| <input type="checkbox"/> Natural Health Products ^b | <input type="checkbox"/> Radiopharmaceutical Sciences | <input type="checkbox"/> PK/PD and Vitamin D Receptor ^c |

^a Health Outcomes research seeks to understand the end results of particular health care practices and interventions. Health Services research includes research with the goal of improving the efficiency and effectiveness of health professionals and the health care system, through changes to practice and policy. Basic biomedical research is not included in this category.

^b Natural Health Products are defined as vitamins and minerals, herbal remedies, homeopathic medicines, traditional medicines such as traditional Chinese medicines, probiotics and other products like amino acids and essential fatty acids. NHPs must be safe to use as over-the-counter products and not need a prescription to be sold.

^c Particularly in the areas of chronic kidney disease or Alzheimer's disease. Applicants for this award must also provide a 500-word summary of their research project for the awards committee to evaluate.

Date of last Advisory Committee Meeting: _____

Scholarships: Please list all awards received from June 1, 2024 to May 31, 2025, including source and amount.

Publications: Please list all publications from June 1, 2024 to May 31, 2025. Include the full authorship list, title, journal, issue and page numbers and the status of the publication. (Only include publications that are either *in press*, or *published within the above dates*; do not include publications that are under review or submitted.)

Research Presentations: Please list all external research presentations (poster and/or oral) from June 1, 2024 to May 31, 2025. Include the full authorship list (underline the presenting author), title of presentation/poster; name and location of the conference, and dates attended.

Leadership and Extracurricular Activities in 2024-2025

Member of PSGSA? ☐ Yes ☐ No

Role & Additional Comments: _____

Other ☐

Additional Comments: _____

Signature of Student: _____ **Date:** _____