

**2017**  
**CARO-CROF Resident Elective Travel Award**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
(Please Print) (area code – number)

E-mail address: \_\_\_\_\_

Address: \_\_\_\_\_  
(please print)

\_\_\_\_\_ (postal code)

Residency Program Location: \_\_\_\_\_ PGY: \_\_\_\_\_ as of \_\_\_\_\_

Residency Program Director: \_\_\_\_\_

**Elective Details:**

Elective Centre: \_\_\_\_\_

Elective Supervisor: \_\_\_\_\_

Proposed Elective Dates: \_\_\_\_\_

Elective Learning Objectives:

- 1)
- 2)
- 3)

Applications are to be submitted to Mary Hooey (Mary.Hooey@uhn.ca) in one PDF file no later than April 15, 2017.

**APPLICATION CHECKLIST (Submit in one PDF):**

- Completed application form
- Curriculum vitae (CV)
- A 500 word personal statement about your interest in this program
- Confirmation of provisional acceptance by host centre and approval from resident's program director

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