



# 2023 Doctoral Personnel Awards for Indigenous Scholars

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## A. GENERAL INFORMATION

Overview Table – 2023 Doctoral Personnel Awards for Indigenous Scholars	
Competition launch date	May 1, 2023
Application deadline	September 1 2023, 3 PM ET
Award notification date	November 2023
Award start date	January 1, 2024
Value	Up to \$90,000 CAD (\$30,000 per year for up to three (3) years)
Application Procedures	See <a href="#">B.10 How to Apply</a>
Contact	Email: <a href="mailto:research@heartandstroke.ca">research@heartandstroke.ca</a>

### A.1 Objectives of the 2023 Doctoral Personnel Awards for Indigenous Scholars

Heart & Stroke, the Canadian Institutes of Health Research Institute of Circulatory and Respiratory Health (CIHR-ICRH), and Brain Canada are committing up to a total of \$450,000 CAD to launch the inaugural 2023 Doctoral Personnel Awards for Indigenous Scholars. Through a process of co-creation, Heart & Stroke engaged with Indigenous leaders, at all career stages, to help inform this funding opportunity. The objective of the competition is to increase the number of highly-qualified Indigenous trainees from First Nations, Inuit or Métis communities, whose traditional and ancestral territories are in Canada, committed to working in heart and/or brain research. The stipends awarded will be up to \$90,000 CAD (\$30,000 per year for up to three (3) years), enabling Indigenous trainees (including Elders and Knowledge Keepers) to focus on their Doctoral research studies and engage with mentors as part of their training.

**Note: All applicants are strongly encouraged to carefully read and follow the instructions and requirements outlined in this guideline document. The Guidelines and Application Form are available in both English and French.**

### A.2 Application Submission Deadline

It is the applicant's responsibility to ensure that a completed application is submitted by email to [research@heartandstroke.ca](mailto:research@heartandstroke.ca) no later than **3:00 PM ET on Friday September 1, 2023**. Any applications attempted or submitted after the deadline will NOT be accepted. There will be no appeal process for late submissions. Please submit the application in the official language of your choice.

### A.3 Incomplete/Unacceptable Applications

All submissions are considered final. No alterations or changes will be accepted. Any incomplete applications, as noted in this guideline document, will not be admissible to the competition.

### A.4 Competition Results

Official letters will be sent to all applicants in November 2023. A public announcement of the awardees will be posted at a later date on the Heart & Stroke Research and Brain Canada websites.

### A.5 Non-Employee Status

The granting of an award is deemed to establish neither an employer-employee relationship nor a partnership between the funders and the recipients.

### A.6 Self-Identification Form

All applicants are required to submit a [Self-Identification Form](#) (Please see [B.12. Application Attachments](#)) when applying for funding; however [applicants](#) may select "I prefer not to answer" for any or all of the

questions, without consequences to the application. This self-identification information will be used by the funders for statistical purposes only, and will NOT be shared with Lay Reviewers or members of the Selection Committee in an identifiable form. Self-identification statistics will always be reported in aggregate form to ensure confidentiality.

### **A.7 Communicating Research to the Public and Donors**

Successful applicants need to be aware that the title of their proposed research and the lay summary could be placed into the public domain or included in the funders' publications without notification. Applicants are cautioned not to disclose information that could endanger a proprietary position in these sections.

Raising funds to support research is difficult and more than ever funders need to let donors and the public know that their donations are being used to support world class research. As successful applicants are well-positioned to explain the role of research in increasing heart and brain health and reducing the burden of heart disease and stroke, they may be asked by Heart & Stroke and Brain Canada to communicate the importance of research to donors and the public, via interviews and meetings with donors.

### **A.8 Ethical Requirements**

By signing and submitting applications to this competition, applicants and their supervisors undertake the responsibility to ensure any experimentation will be acceptable to the institution on ethical grounds and comply with the following guidelines and host institution research policies, as applicable:

- Tri-Council Policy Statement: [Ethical Conduct for Research Involving Humans](#)
- [Good Clinical Practice \(GCP\)](#)
- [Good Laboratory Practice \(GLP\)](#)
- In the case of laboratory animal experimentation, the guiding principles and standards that have been enunciated by the [Canadian Council on Animal Care](#)
- Guidelines and standards for biological and chemical hazards as outlined in the Public Health Agency/Canadian Food Inspection Agency's [Canadian Biosafety Standards and Guidelines](#)
- Any research involving human pluripotent stem cells must adhere to the CIHR-ICRH [Guidelines for Human Pluripotent Stem Cell Research](#). The institution must notify Heart & Stroke as to the results of the review by the CIHR Stem Cell Oversight Committee.
- [TCPS2 \(2022\) – Chapter 9: Research Involving the First Nations, Inuit, and Métis Peoples of Canada](#)

### **A.9 Sex- and Gender-Based Analysis Plus (SGBA+), Equity, Diversity and Inclusion (EDI), and Ethical Conduct of Research Involving Indigenous Peoples (First Nations, Inuit and Métis)**

The funders are committed to advancing SGBA+ and EDI towards enhancing the specificity, representativeness, rigour and transparency of research and sustaining positive change in the heart and brain research ecosystem. The applicants are therefore encouraged to become familiar with the principles of SGBA+, EDI, and the framework for ethical conduct of research involving Indigenous Persons (First Nations, Inuit and Métis), with the goal of integrating such principles, if applicable, into future research practice and design.

- [Government of Canada Best Practices in Equity, Diversity and Inclusion \(EDI\)](#)
- [Guide on Equity, Diversity and Inclusion Terminology](#)
- [CIHR-ICRH Sex and Gender Training Module](#)
- [Women's College Hospital Sex-Specific Analyses and Reporting in Clinical Trials](#)
- [TCPS2 \(2022\) – Chapter 9: Research Involving the First Nations, Inuit, and Métis Peoples of Canada](#)
- [Heart & Stroke Glossary of SGBAR and EDI Terminology](#)
- [Heart & Stroke List of SGBAR and EDI E-Learning and Resources for Researchers](#)

## A.10 Patent Rights

The funders have no intellectual property (IP) claims on the outputs of the funded research. However, institutions of funded recipients are expected to have appropriate policies in place to protect the IP of the outputs that arise from the funded research.

## A.11 Open Science and Open Access and Data Sharing Policy

All award recipients are required to make their research outputs and findings (see below) publicly available as soon as possible but no later than twelve (12) months after research project completion or final publication. To meet this requirement, applicants should become familiar with the guiding principles that enable sharing data, information, tools and resources, and that respect Indigenous data governance and sovereignty.

- [Open Science](#) is the practice of making scientific inputs, outputs and processes freely available to all with minimal restrictions. Open Science is enabled by people, technology, and infrastructure. It is practiced in full respect of privacy, security, ethical considerations, and appropriate intellectual property protection. To learn more about Open Science, applicants are encouraged to review the Federal Government's [Roadmap for Open Science](#).
- [FAIR: Findable, Accessible, Interoperable, and Reusable](#) are guiding principles to inform data management and stewardship of digital assets.
- [CARE \(Collective Benefit, Authority to Control, Responsibility, Ethics\)](#) are guiding principles for Indigenous Data Governance.
- First Nations [Principles of OCAP® \(Ownership, Control, Access, and Possession\)](#) guide how First Nations' data should be collected, protected, used and shared.
- [ClinicalTrials.gov](#) is a database of privately and publicly-funded clinical trials around the world.
- [PROSPERO](#) is an international prospective register of protocols related to COVID-19.

Research outputs may include peer-reviewed journal publications, research data, and the results of clinical trials that will not be published in peer-reviewed journals. Research findings may be shared in ways that are culturally relevant and in formats that are functional, useful and practical to distinct needs of Indigenous (First Nations, Inuit and Métis) communities. Indigenous Peoples share some common histories; however, each community has specific methods for knowledge synthesis, translation, and exchange. For Indigenous knowledge mobilization to be successful, [meaningful and culturally safe](#), engagement with Indigenous communities is encouraged as Indigenous communities are best positioned to guide researchers towards the co-development knowledge mobilization practices that work best for their communities.

## A.12 Research Integrity Policy

The primary objective of [Heart & Stroke's Research Integrity Policy](#) is to protect and defend the integrity of the research process and to deal with allegations of scientific misconduct in a timely and transparent fashion. Data related to research by and with Indigenous Peoples (First Nations, Inuit, Métis), whose traditional and ancestral territories are in Canada, must be managed in accordance with data management principles developed and approved by those communities, and on the basis of free, prior and informed consent. This includes, but is not limited to, considerations of Indigenous data sovereignty, as well as data collection, ownership, protection, use, and sharing.

Responsibilities of researchers, institutions and Heart & Stroke with respect to research integrity are outlined in the [Heart & Stroke Framework: Responsible Conduct of Research](#). Heart & Stroke defines research misconduct to include actions that are inconsistent with "integrity" as defined in the [Tri-Agency Policy Framework for the Responsible Conduct of Research](#), and to include such actions as fabrication, falsification, destruction of research records, plagiarism, redundant publications or self-plagiarism, invalid authorship, inadequate acknowledgement, mismanagement of Conflict of Interest. Heart & Stroke will assess allegations of scientific misconduct in the following manner:

- Any allegation of scientific misconduct will be initially reviewed by Heart & Stroke to determine whether an investigation is warranted. If it is felt that an investigation is required, Heart & Stroke

may request that this be conducted by the host institution of the individual considered to have performed the alleged misconduct. In allegations specifically related to the peer review process, the investigation may be conducted jointly by the institution and Heart & Stroke.

- Heart & Stroke will not act on verbal allegations of misconduct. All allegations must be submitted in writing. Although the confidentiality of persons who submit an allegation of scientific misconduct will be protected as much as possible, it must be recognized that due process will often result in the identity of this person being released to the investigating institution.
- The institution will be required to submit a written report upon conclusion of the investigation. This report will summarize the findings of the investigation and any future actions that will be undertaken by the institution as a result of the findings.
- Applicants must certify that all statements made (or answers provided) in the application are correct and complete. Any misrepresentation of these statements (or answers provided) may result in the cancellation of the award.
- In cases where misconduct is concluded to have occurred, Heart & Stroke may apply sanctions against the individual(s) implicated. These sanctions will range from a reprimand letter to a ban from applying for or holding Heart & Stroke funds for a set period of time.

### **A.13 Acknowledging Publications**

Heart & Stroke must be notified in advance of the publication date of any major publications arising from the funded research by email at: [research@heartandstroke.ca](mailto:research@heartandstroke.ca). Recipients must acknowledge the support of Heart & Stroke, CIHR-ICRH and Brain Canada in all scientific communications and press releases related to their award with the following wording:

*“This work was supported by the Heart and Stroke Foundation of Canada, the Canadian Institutes of Health Research Institute of Circulatory and Respiratory Health (CIHR-ICRH), and the Canada Brain Research Fund (CBRF), an innovative arrangement between the Government of Canada (through Health Canada) and Brain Canada Foundation”.*

### **A.14 Funding Availability**

Financial contributions for this initiative are subject to availability of funds. Should the funders' funding levels not be available or decrease due to unforeseen circumstances, funders reserve the right to reduce, defer or suspend financial contributions to grants received as a result of this funding opportunity.

## B. SPECIFIC PROGRAM INFORMATION

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### B.1 Eligibility Criteria

Applicants must meet the following criteria:

- a. Applicants must self-identify as Indigenous (i.e., individuals from First Nations, Inuit and/or Métis communities whose traditional and ancestral territories are in Canada).
- b. At the time of submission, applicants must either (a) be enrolled in a full-time Doctoral program at an [eligible Canadian institution](#), (b) have applied for full-time admission to a Doctoral program at an eligible Canadian institution with a start date of no later than January 1, 2024, or (c) are intending to reclassify from a Master's to a Doctoral program at eligible Canadian institution with a start date of no later than January 1, 2024.
- c. Applicants must have an identified research supervisor based at an eligible Canadian institution where the research will be undertaken.
- d. Applicants must submit, from the institution, written evidence of being enrolled as a full-time student in a Doctoral program prior to funds being released ([See B.12 Statement of Acceptance](#)).

**Note: Given that this Funding Opportunity is only open to specific populations, selecting "I prefer not to answer" in the [Application Form](#) as to whether you identify as an Indigenous person will prevent your candidacy from being considered.**

### B.2 Tenure

- a. The award is scheduled to start on January 1, 2024, for a period of up to 36 months. The term of the award will include reasonable holiday time according to the arrangement with the recipient's supervisor and institution.
- b. Partial Doctoral Personnel Awards for less than one (1) year of funding are not available.
- c. The recipient may be eligible for one (1), two (2), or three (3) years of funding, depending on when during their degrees they apply for the award.
- d. The recipient is entitled to a paid parental leave of up to twelve (12) months. In such cases, tenure of the award will be extended by the time taken up to a maximum of twelve (12) months. For further details, recipients are encouraged to review the [Heart & Stroke Grant Management Guidelines](#) (or [Tri-Agency Policy on Paid Interruption](#)).
- e. The recipient must notify Heart & Stroke if their Doctoral registration status changes (e.g., termination of studies, successful defense, program change, etc.).

### B.3 Stipend and Allowances

- a. Recipients may be awarded up to \$90,000 CAD (\$30,000 per year for a maximum of three (3) years). See [B.4 Disclosure of Other Awards](#) for details.
- b. These multi-year stipends may be used ONLY for salary support for the recipient. No part of this stipend is to be used to support other direct or indirect costs associated with any research programs or operating grants.
- c. Recipients may engage in and receive remuneration for departmental activities (e.g., undergraduate teaching) that contribute to their development as a researcher. It is expected that these activities would not impinge upon the time dedicated to the proposed research training.

### B.4 Disclosure of Other Awards

It is the responsibility of the recipient and/or the supervisor to inform Heart & Stroke if they receive any other stipend award (i.e., NOT travel or poster awards) within 30 days of receiving notification of a successful Doctoral Personnel Award for Indigenous Scholars, or at any time during the tenure of the award. Disclosure of alternate stipend awards must include the formal offer of the award(s), along with the terms and conditions. Recipients may NOT hold another stipend award(s) valued at \$30,000 or higher per year at the same time as this award. Should the recipient receive another award for less than \$30,000 per year



for three (3) years, top up funding is available under this program for the recipient to reach \$30,000 per year for three (3) years.

### **B.5 Multiple Heart & Stroke Awards**

Applicants may submit applications to multiple Heart & Stroke Personnel Awards, but they may not hold multiple Heart & Stroke Personnel Awards at one time. This includes awards through the Heart & Stroke open competition and strategic initiative.

### **B.6 Transfer of Award**

Personnel Awards may not be assigned or transferred to another individual under any circumstances. Should the recipients of Personnel Awards change supervisors, programs or institutions, they must notify Heart & Stroke who, together with the other funders, will determine on a case-by-case basis whether the award can be transferred. The institution to which the award recipient is moving will be required to supply the same supporting documentation as was required in the original application.

### **B.7 Award Termination**

When work under an award is complete, or if for any reason the work cannot be continued, the award will be closed. Any remaining funds will be frozen and cannot be reallocated to other uses. The institution will prepare the final accounting and return outstanding funds to the funders.

### **B.8 Prolonged Absence from Work**

The recipient or supervisor will notify Heart & Stroke of any causes (parental leave, medical leave, personal leave, vacation time, etc.) necessitating absence from work exceeding thirty (30) successive days. Continuation of the award will be evaluated on a case-by-case basis by the funding partners. Relevant institutional policies will also apply.

### **B.9 Eligible Research Areas**

The recipient must estimate the proportion of the proposed heart and/or brain research that falls under the four (4) health research themes as defined by CIHR.

#### Theme 1. Biomedical Research

Research with the goal of understanding normal and abnormal human function, at the molecular, cellular, organ system and whole-body levels, including the development of tools and techniques to be applied for this purpose; developing new therapies or devices which improve health or the quality of life of individuals, up to the point where they are tested on human subjects. Biomedical research may also include studies on human subjects that do not have a diagnostic or therapeutic orientation.

#### Theme 2. Clinical Research

Research with the goal of improving the diagnosis and treatment (including rehabilitation and palliation) of disease and injury; improving the health and quality of life of individuals as they pass through normal life stages. Clinical research usually encompasses research on, or for the treatment of, patients.

#### Theme 3. Health Services Research

Research with the goal of improving the efficiency and effectiveness of health professionals and the health care system, through changes to practice and policy. Health services research is a multidisciplinary field of scientific investigation that studies how social factors, financing systems, organizational structures and processes, health technologies, and personal behaviours affect access to health care, the quality and cost of health care, and ultimately the health and well-being of all people in Canada.

#### Theme 4. Social, Cultural, Environmental, and Population Health Research

Research with the goal of improving the health of the Canadian population, or of defined sub-populations, through a better understanding of the ways in which social, cultural, environmental, occupational, and economic factors determine health status.

### **B.10 How to Apply to the Doctoral Personnel Awards for Indigenous Scholars**

A complete application must include the following: [Application Form](#) and Application Attachments (Personal Statement, Two (2) Letters of Reference, Research Summary, Mentorship & Training Plan, Academic Transcript(s), Applicant's Canadian Common CV (Heart & Stroke version), [Self-Identification](#) Form, Supervisor's Canadian Common CV (Heart & Stroke version), Statement of Acceptance from Institution).

**Note: Should any significant changes occur from the time of submission to award notification, Heart & Stroke reserves the right to withdraw that application from the competition. Changes to a research topic beyond the broad fields of heart and/or brain research will need to be justified. Changes that impact eligibility status such as acceptance of another grant of equal or higher value, or evidence of falsifying identity, will result in application withdrawal. Misrepresentation of any content by the applicant may result in cancellation of the award.**

### **B.11 Application Form**

The [Application Form](#) is a fillable PDF available in both English and French. Note that all sections of the Application Form must be completed for the Application Attachments to progress to the review stage.

### **B.12 Application Attachments**

The required application attachments are listed below in the Personal, Research, Academic and Additional Components. Attachments may be completed in English or French. All application attachments must be in PDF format, single-spaced using either 12-point Times New Roman or 11-point Arial font. Condensed type or spacing is not acceptable. Margins should be set at 1.87 cm (3/4 inch) all around. Applicants should use the following style for labelling their files:

Application Attachment\_LAST NAME, First Name of Applicant\_Date of Submission

As an example:

Personal Statement\_DOE, Jane\_ August 30, 2023

**Note: Applicants should upload all relevant attachments in a single email to [research@heartandstroke.ca](mailto:research@heartandstroke.ca). Referees should send Letters of Reference directly to [research@heartandstroke.ca](mailto:research@heartandstroke.ca). The applicant's institution must send the Statement of Acceptance directly to [research@heartandstroke.ca](mailto:research@heartandstroke.ca).**

### **Personal Component**

**Personal Statement.** In a maximum of two (2) pages, applicants should outline the relevant experiences (lived, academic and/or community) that have led up to their current career goals.

**Two (2) Letters of Reference.** The two (2) referees listed in the [Application Form](#) who are able to provide insight into the applicant's character and ability to pursue a career in research must email their letters of reference directly to Heart & Stroke [[research@heartandstroke.ca](mailto:research@heartandstroke.ca)]. Please label the file and email subject as follows: Letter of Reference\_LAST NAME, First Name of Applicant\_Referee Initials\_Date of Submission. Each letter of reference should be no more than two (2) pages. At least one letter must be from an academic familiar with the applicant's work/research. The other letter may be from a community member or an

academic member. Due to conflict of interest, letters of support from employees of Heart & Stroke, Brain Canada, and CIHR-ICRH are not permitted.

### Research Component

**Research Summary.** In a maximum of one (1) page, applicants should detail the rationale, objective(s), methodological approach, timeline, and significance/impact of the proposed research.

**Mentorship & Training Plan.** In a maximum of two (2) pages, the applicant and supervisor should develop a plan that includes: (a) The role of the applicant's advisory committee (supervisor and/or co-supervisors) in mentoring the applicant; (b) The expected research milestones over the course of the award; (c) Specific knowledge and skills that the supervisor expects the applicant will acquire; (d) An overview of the research and academic training environment for the applicant; (e) Details on resources, programs, technologies, etc., which will be made available to the applicant.

### Academic Component

**Academic Transcript(s).** Include both official undergraduate and graduate transcripts, if applicable.

**Applicant's Canadian Common CV (Heart & Stroke version only).** The [Canadian Common CV \(CCV\)](#) allows researchers to enter their CV data once and output it in formats suitable for submission to CCV Network member organizations, including Heart & Stroke and CIHR. Applicants should login to the web-based form to enter their CV information directly online [<https://ccv-cvc.ca/indexresearcher-eng.frm>] for the categories including, but not limited to: education, recognitions, employment, research funding history, activities (supervisory, mentoring, community and volunteer, knowledge and technology transfer, international collaboration), contributions (presentations, interview and media relations, publications, intellectual property). Please see the [CIHR Academic CCV](#) guide for tips on completing the sections with the information requested. Upon completing the CCV, output the form in the Heart & Stroke format.

### Additional Components

**Applicant's Self-Identification Form.** Applicants are required to submit the [Self-Identification Form](#) when applying for funding; however they may select "I prefer not to answer" for any or all of the questions, without consequences to the application. Self-Identification information will be used by the funders for statistical purposes only, and will NOT be shared with Lay Reviewers or members of the Selection Committee in an identifiable form. Self-Identification statistics will always be reported in aggregate form to ensure confidentiality.

**Supervisor's Canadian Common CV (Heart & Stroke version only).** Applicants are required to submit the supervisor's Canadian Common CV (CCV) as part of their application. This information will not be included in the Evaluation Criteria, but is requested so that the Selection Committee can gauge the alignment of a supervisor's research expertise with proposed research of the applicant. The [Canadian Common CV \(CCV\)](#) allows researchers to enter their CV data once and output it in formats suitable for submission to CCV Network member organizations, including Heart & Stroke and CIHR. Supervisors should use the web-based form to enter their CV information directly online [<https://ccv-cvc.ca/indexresearcher-eng.frm>] for the categories including, but not limited to: education, recognitions, employment, research funding history, activities (supervisory, mentoring, community and volunteer, knowledge and technology transfer, international collaboration), contributions (presentations, interview and media relations, publications, intellectual property). Once you have completed the CCV, output the form in the Heart & Stroke format. Please see the [CIHR Academic CCV](#) guide for tips on completing the sections with the information requested.

**Statement of Acceptance from Institution.** The applicant's institution must forward a Statement of Acceptance detailing the start date and research program for applicants who are already enrolled in a graduate program at the time of application submission. For those applicants who are not enrolled in a graduate program at the time of application submission, institutions must send a Statement of Acceptance

prior to initiation of the award. Statements of Acceptance should be emailed by the institution to [research@heartandstroke.ca](mailto:research@heartandstroke.ca).

### B.13 Submission Process and Checklist

Use the Application Checklist below to confirm that the relevant PDF attachments have been completed and submitted. The applicant should send all relevant application attachments (in PDF format) in **one (1) email** to [research@heartandstroke.ca](mailto:research@heartandstroke.ca). All email applications will be confirmed. The applicant's referees should email the Letters of Reference (in PDF format) directly to [research@heartandstroke.ca](mailto:research@heartandstroke.ca). The applicant's institution should email the Statement of Acceptance directly to [research@heartandstroke.ca](mailto:research@heartandstroke.ca).

Application Checklist	Completed and Submitted
<b>Applicant</b>	
Application Form	
Personal Statement	
Research Summary	
Mentorship and Training Plan	
Academic Transcripts (undergraduate and graduate if applicable)	
Applicant's Common CV (Heart & Stroke Version)	
Applicant Self-Identification Form	
Supervisors' Common CV (Heart & Stroke Version)	
<b>Referee</b>	
Letter of Reference #1	
Letter of Reference #2	
<b>Institution</b>	
Statement of Acceptance from Institution (if enrolled in graduate program at time of application)	

### B.14 Evaluation Criteria

All applicants must self-identify as Indigenous (i.e., individuals from First Nations, Inuit and/or Métis communities whose traditional and ancestral territories are in Canada) for the application to proceed to the evaluation stage. The Personal, Research and Academic Components, noted below, will be reviewed by the Selection Committee which will calculate an overall score for each applicant. The relative weight of each component is detailed below.

Review Criteria	Application Attachment	Relative Weight
Personal Component (40%)	Personal Statement	20%
	Letters of Reference	20%
Research Component (30%)	Research Summary	15%
	Mentorship & Training Plan	15%
Academic Component (30%)	Academic Transcript(s)	15%
	Applicant Common CV (Heart & Stroke version only)	15%

**Should any significant changes occur from the time of submission to award notification, Heart & Stroke reserves the right to withdraw that application from the competition. Changes to a research topic beyond the broad fields of heart and/or brain research will need to be justified. Changes that impact eligibility status such as acceptance of another grant of equal or higher value or evidence of falsifying identity will result in application withdrawal.**

**PERSONAL COMPONENT ASSESSMENT (40%)**

This component, composed of the Personal Statement and Letters of Reference, is intended to assess the applicant’s potential to pursue a career in research.

Indicators of excellence include:

- lived experience;
- community experience;
- work experience;
- leadership experience;
- involvement in academic life; and
- volunteerism/community outreach.

**RESEARCH COMPONENT ASSESSMENT (30%)**

This component, composed of the Research Summary and Mentorship & Training Plan, is intended to assess the quality of the proposed research as well as the mentorship and training plan.

Indicators of excellence include:

- creativity of proposed research;
- sound rationale;
- well-defined goals and objectives;
- appropriate approaches and methodologies to answer the research questions;
- realistic timelines for completing the proposed research;
- impact of proposed research to heart and/or brain-related knowledge, healthcare, health services or health outcomes;
- clear role of applicant’s advisory committee (supervisor and/or co-supervisors) in mentoring the applicant;
- clear research milestones over the course of the award;
- specific knowledge and skills that the supervisor expects the applicant will acquire;
- alignment of academic training environment with the applicant’s proposed research; and
- appropriate resources, programs, technologies available for the applicant’s research and training.

**ACADEMIC COMPONENT ASSESSMENT (30%)**

This component, composed of the Academic Transcript and the Applicant’s Common CV, is intended to assess past academic results, transcripts, awards and distinctions.

Indicators of academic excellence include:

- academic record;
- type of program and courses pursued;
- relative standing (if available);
- recognitions, scholarships and awards;
- employment history;
- research funding history;
- activities (supervisory, mentoring, community and volunteer, knowledge and technology transfer, international collaboration); and
- contributions (presentations, interview and media relations, publications, intellectual property).

Awards will be granted in a top-down rank, according to the following grading scheme. The overall score for each applicant will be scored on a scale from 0 to 100% and ranked from Very Good (70-80%) to Excellent (81-90%) or Outstanding (91-100%).

Overall Score	
Outstanding	91 - 100%
Excellent	81 - 90%
Very good	70 - 80%
Threshold for funding	70%

On a case-by-case basis, the Selection Committee may deem applicants whose scores do NOT meet the threshold for funding to be eligible for an Iterative Peer Review Process. This process provides such applicants with the opportunity to address specific questions at the request of the Selection Committee so that reviewers have the necessary information to come to an informed funding recommendation. Applicants participating in the Iterative Peer Review Process will be notified of the questions to address and the specific timeframe in which to submit their responses.

### **B.15 Selection Committee and Lay Reviewers**

Heart & Stroke's peer review process engages national and international researchers and includes over 180 members of the [Scientific Review Committee](#) (SRC). The SRC is overseen by the Executive Chair and Vice-Chair and comprises up to 13 separate committees that ensure in-depth knowledge and expertise in all areas of heart disease and stroke. The SRC Executive Chair and Vice-Chair are non-voting members. Review panels may meet in person or virtually at the discretion of the SRC and Heart & Stroke. The SRC will oversee the Selection Committee and the Lay Reviewers. All members must agree to respect the privacy, confidentiality and conflict of interest rules of the funders.

The funders will recruit an ad-hoc Selection Committee, comprised of a minimum of 6-8 external members (depending on the number of applications received), with the majority of members being Indigenous, including representatives from the heart and brain research community, and members from the Indigenous community. The Selection Committee will include a dedicated Chair. If necessary, Heart & Stroke may recruit international members for the Selection Committee.

Non-voting Lay Reviewers are incorporated into the scientific review process to increase accountability and transparency of the review process and ensure that the proposed research is aligned with the objectives of this funding competition. Every effort will be made to recruit Indigenous Lay Reviewers. If Lay Reviewers identify that a lay summary is not suitable for a general audience, the recipient will be asked to revise and resubmit the lay summary. For more information on the lay summary, please see the [Application Form](#).

### **B.16 Notification of Results and Award Commencement**

All applicants will be notified of the results in November 2023. The award is scheduled to start on January 1, 2024.

### **B.17 Reporting: Financial, Progress and Final Reports**

The recipient's institution is required to submit (a) an annual consolidated Financial Report for the reporting period for the recipient, (b) an annual Progress Report for the recipient; and c) a Final Report for the recipient.

The annual Finance and Progress Reports are to be received no later than 30 days after the end of each funding year (e.g., if award start date is January 1, 2024, the first annual Financial and Progress Reports would be due February 1, 2025). Satisfactory Financial and Progress Reports are required; the recipient can expect to receive communication from Heart & Stroke within sixty (60) business days if any issues of concern are identified with a submitted annual report.

A Final Report must also be submitted by the institution to Heart & Stroke no later than 30 days after completion/termination of the award (e.g., for Doctoral Awards ending January 1, 2027, the final report would be due February 1, 2027). Recipients will be sent links to the report templates within the first year of award funding.

## **B.18 Contact Information**

**For any questions or concerns, the preferred form of communication is email.** Your email will go to a research email inbox which is accessed by multiple research team members and is the best way to get a timely response.

Research Department

Heart and Stroke Foundation

Email: [research@heartandstroke.ca](mailto:research@heartandstroke.ca)

Website: <https://www.heartandstroke.ca/what-we-do/research/for-researchers>

<b>Please note this EMAIL ACCOUNT is only monitored from 9am-5pm ET, Monday to Friday.</b>
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## **B.19 About the Funders**

### **[Heart and Stroke Foundation of Canada](#)**

Life. We don't want you to miss it. That's why Heart & Stroke leads the fight against heart disease and stroke. We must generate the next medical breakthroughs so people in Canada don't miss out on precious moments. Together, we are working to promote health, save lives and enhance recovery through research, health promotion and public policy.

### **[Canadian Institutes of Health Research Institute of Circulatory and Respiratory Health \(CIHR-ICRH\)](#)**

The Institute of Circulatory and Respiratory Health (ICRH) supports research into the causes, mechanisms, prevention, screening, diagnosis, treatment, support systems, and palliation for a wide range of conditions associated with the heart, lung, brain (stroke), blood, blood vessels, critical and intensive care, and sleep. The ICRH vision is to achieve international leadership by fostering an environment of openness, excitement, energy, commitment and excellence in highly ethical, partnered initiatives focused on research, research training, and research translation for the circulatory and respiratory sciences and for the betterment of the health of Canadians.

### **[Brain Canada](#)**

Brain Canada Foundation is a national non-profit organization that develops and supports collaborative, multidisciplinary, multi-institutional research across the neurosciences. Through partnering with the public, private and voluntary sectors, Brain Canada connects the knowledge and resources available in this area to accelerate neuroscience research and funding and maximize the output of Canada's world-class scientists and researchers.