The VADA Program
Visual and Automated Disease Analytics
Graduate Training Program

Interim Report Form for Current PhD Students 2019/20

PLEASE FOLLOW THESE INSTRUCTIONS

a) Complete the information below (be as comprehensive and detailed as possible – this report is meant to capture outcomes that NSERC asks of its CREATE funded initiatives);
b) Send the completed report and **an original transcript** to the Program Coordinator– Allison.poppel@umanitoba.ca 300-753 McDermot Avenue, Winnipeg, MB, R3E 0T6

Due Date: January 31st 2020

Trainee Information

Last Name	
First Name	
Home Address	
City	
Province	
Postal Code	
Phone	
E-Mail Address	

Graduate Program Information

University	
Department/School	
Month/Year you started your PhD degree program	
Advisor	
Co-Advisor (if applicable)	
Anticipated Graduation Date	

University of Manitoba NSERC CRSNG University of Victoria

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A. Completion of VADA Program Training Requirements

Your VADA Program stipend has been awarded to you as a way of buying out your time so that you are able to fully participate in the training activities. Please complete the following.

Have you attended every session of the Foundations Course? ☐ Yes ☐ No

Internship/Lab Exchange (mm/dd/yyyy)

Expected Start Date: **Expected End Date:**

Provide a brief update about your internship or lab exchange if applicable (ie. What will you be working on, what will the objectives be, do you have any concerns, etc).

B. Thesis/Dissertation Progress

Thesis/Dissertation Title (if available) OR topic	
(Anticipated) Date of Thesis/Dissertation Proposal Defense	
(Anticipated) Date of Thesis/Dissertation Defense	

Provide an update about the progress of your thesis research since September 2019.

C. Research Activities

List your peer-reviewed publications and manuscripts submitted for peer review publication (September 2019 to present). Please specify the type (conference presentation or poster, articles submitted or accepted month), name of journal/conference/etc. and year of submission/acceptance.

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List the conferences, workshops, or other training events you attended (September 2019 to present). Please provide the focus of the training (professional or technical skills), the title of the event/training, a brief description, the start date and its duration in hours.

D. Financial

Other than VADA Program funding, list any awards that you applied for and/or received since September 2019. Also include any awards you applied for and/or received for the 2020/21 academic year.

Awards Applied For:

Award Name/Agency	Funding Period	Amount

Awards Received:

Award Name/Agency	Funding Period	Amount

List other sources of funding received, such as research or teaching support, support from advisor, employment income etc. If employment income, please specify the number of hours you work per week.

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Agreement and Signature

The undersigned hereby certify that:

1. I certify that all information contained in the application and all information I will provide later (electronically or otherwise) related to this application, including any amendments, are and will be accurate and complete.
2. I authorize VADA to exchange all information regarding my application for reporting purposes.

Student Name (print):	
Student Signature:	
Date:	

Section to be Completed by the Student's Supervisor or Proposed Supervisor

I have reviewed and support _____ (student's name) application to the VADA Program for a 2nd Year of PhD funding.

Supervisor Comments:

Supervisor Name (print):	
Supervisor Signature:	
Date:	

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Please submit to:
Allison Poppel - VADA Program Coordinator
George and Fay Yee Centre for Healthcare Innovation
Third floor, Chown Building
753 McDermot Avenue
Winnipeg, MB, Canada R3E 0T6
Email: Allison.poppel@umanitoba.ca

This report form will be used to determine PhD students' eligibility to receive a second year of funding from the VADA program.
Students enrolled in the VADA program who have submitted this form must also submit a Final Report Form by the August 31, 2020 deadline.

University of Manitoba
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University of Victoria