

***The Mach-Gaensslen Foundation of Canada***  
*Encouraging Research in Cardiology, Oncology, and Psychiatry*

This is an agreement is between the Mach-Gaensslen Foundation of Canada  
(Foundation)  
And

\_\_\_\_\_ **(Grant Recipient)**

that sets out reciprocal obligations between ourselves. The Foundation will provide the Grant Recipient  
\$ \_\_\_\_\_ to perform research in some aspect of oncology, cardiology, or psychiatry in the  
summer of \_\_\_\_\_. In return, the Grant Recipient will assist the Foundation to study

- (i) the effects of student participation in a summer research program on a student's medical career choice and
- (ii) participation in medical research throughout the student's career.

This summer student research grant assistance will be provided to those selected students who agree with completion of:

- a questionnaire before and after completion of the research project,
- a one-time program evaluation questionnaire,
- a consent to publish the student's name and research title on the Foundation's website,
- a research report and a Research Abstract (one-page) by October 30 in the year the research is carried out
- a follow-up questionnaire in the form of an on-line survey five years after completion of the summer student research until cessation of practice.

Copies of the forms and questionnaires are appended to this agreement. The Grant Recipient allows and instructs the University to provide future contact information (including e-mail address) to the Foundation for the purpose of obtaining information about ongoing professional research activities.

Any information the Grant Recipient provides will be treated as confidential. No personally identifiable data will ever be reported by the Foundation without the Grant Recipient's explicit consent.

The Grant Recipient also warrants that the research to be carried out as a result of this funding meets the ethical requirements of the Grant Recipient's University's ethical policies/guidelines.

Dated at: \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2\_\_\_\_\_

\_\_\_\_\_  
Grant Recipient

\_\_\_\_\_  
Witness

Current e-mail address: \_\_\_\_\_