



## SGC VISITING SCIENTIST APPLICATION

SGC SITE APPLYING TO:    TORONTO                       OXFORD                       STOCKHOLM

### 1. PERSONAL INFORMATION

Surname/Last Name:

First Name(s):

Present Address:

Permanent Address:

Home Telephone Number:

Work Telephone Number:

Email Address:

I am a citizen of Canada

I am a citizen of

Name Country

If you are not a Canadian, provide:

Type of Visa

Expiration Date

## 2. COLLABORATION DETAILS

Name of Current Institution:

Address:

Current Title:

### C.V. (Please Attach)

Current Supervisor Name:

Address

Current Supervisor Work Telephone Number:

Current Supervisor Email Address:

Dates and Length of Proposed Collaboration:

SGC Program Applying to and Overseeing Principal Investigator (PI):  
(Ex. Cell Signaling and Metabolism, Dr. Hee-Won Park)

Protein Target Family or Specific Project You Wish to Study:

Additional Program Information:

### 3. FUNDING AND CONFIDENTIALITY AGREEMENT

As an applicant to the SGC Visiting Scholars Program, I acknowledge that during the collaboration, my current research institution will be responsible for maintaining my salary and will provide me with a stipend for accommodation and living expenses. If my institution fails to do this, I am aware that the SGC shall not be responsible to meet these costs. I further acknowledge that the SGC will cover all associated laboratory and on-site costs during the collaboration.

YES  NO

As an applicant to the SGC Visiting Scholars Program, I acknowledge that the SGC is a not-for-profit public-private partnership formed to determine the three dimensional structures of proteins of medical relevance, and to place them in the public domain without restriction on use. I am also aware that the SGC does not focus on patenting its work, or on commercial opportunities associated with its research.

YES  NO

As an applicant to the SGC Visiting Scholars Program, I acknowledge that the identity of SGC target proteins shall remain confidential until they are deposited into the Protein Data Bank.

YES  NO

**I hereby certify that the information presented on this application is accurate and complete.**

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Applicant Signature

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Date (dd/mm/year)

**Please return signed application along with copy of current CV to:**

Linda McBroom-Cerajewski  
External Collaborations Manager  
SGC - University of Toronto  
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