Arnie Charbonneau Cancer Institute

Patient Partner Co-Mentorship Program

Trainee Application Form

The Co-Mentorship Program at the Charbonneau Cancer Institute brings cancer research trainees and patient partners together in a structured co-mentorship experience. Through the program, trainees gain insight into lived experience and learn how patient and caregiver perspectives can inform research priorities, study design, interpretation of findings, and knowledge translation.

The Winter 2027 program will run from January to May 2027 and includes 12 in-person 90-minute learning sessions at the Arthur J.E. Child Comprehensive Cancer Centre (Tuesdays from 1:00 to 2:30PM), as well as approximately 60 minutes per week of meetings with your co-mentor between January and April 2027.

For full program details please visit the Co-Mentorship Program on the Charbonneau website.

Application Deadline: 11:59 p.m., Tuesday, December 1, 2026 to charbonneau@ucalgary.ca .

Trainees will be paired with patient partners based on shared interests, experiences, and goals. Selection is not based on academic merit, but on alignment with the program objectives and the applicant's commitment to patient engagement and collaborative learning.

Applicant Information	
Full Name:	
Email:	
Program:	MSc ☐ PhD ☐ Postdoc ☐
Year of Training:	
Department:	

Supervisor Information	
Supervisor:	
Co-Supervisor (if applicable)	

Research Information	
Project Title:	
Project Keywords:	

Statement of Interest

Statement of Interest (500 words max)

Please describe:

- Why you are interested in participating in the Co-Mentorship Program.
- How participation aligns with your short- and long-term goals, and what you hope to gain from the experience.
- What unique perspectives, skills or experiences, or strengths you would bring to the program.
- Is there anything else you would like us to consider when matching you with a patient or caregiver co-mentor.

Understanding of Patient Engagement (150 words)

Please describe your understanding of patient engagement in research, why you believe it is important, and what you hope to learn from working directly with a patient or caregiver partner.

Please rate your previous experience with patient engagement:

High ☐ Moderate ☐ Low ☐ None ☐

Commitment Checklist	
I understand participation includes meeting with my patient partner for approximately 60 minutes per week outside of the scheduled group sessions.	☐
I understand participation includes attending 12 weekly 90-minute sessions on Tuesdays from 1:00 to 2:30PM	☐
I have reviewed the program guidelines.	☐
I am committed to respectful and collaborative engagement.	☐
I have approval from my supervisor.	☐
I am committed to participating in the program from January through May 2027.	☐
I have included an up-to-date CV with my application.	☐

Terms of Agreement	
By signing below, the applicant and supervisor confirm that the information provided is accurate and that they have reviewed and agree to the program requirements.	
Applicant Signature:	
Supervisor Signature:	