



KRESCENT Summer Studentship Program Application Form

The application package must be assembled and submitted electronically as an email attachment(s) to research@kidney.ca.

The application deadline is **11:59 PM EST, Monday, February 23, 2026**.

Application Check

<input type="checkbox"/> Reviewed KRESCENT Summer Studentship Guidelines
<input type="checkbox"/> Application Form
<input type="checkbox"/> Curriculum Vitae
<input type="checkbox"/> Two Letters of Support

Applicant Information

Name:					
Email Address:					
Do you identify as:	<input type="checkbox"/> First Nations	<input type="checkbox"/> Inuit	<input type="checkbox"/> Métis	<input type="checkbox"/> Black	
Preferred language of study:	<input type="checkbox"/> English	<input type="checkbox"/> French			
Academic Status	<input type="checkbox"/> Undergraduate		<input type="checkbox"/> Medical Student		
University:			Program:		
Current year of study:	<input type="checkbox"/> 1 st Year	<input type="checkbox"/> 2 nd Year	<input type="checkbox"/> 3 rd Year		
Location for the summer of 2026:					
Expected Date of Graduation (i.e., May 2027):					
How many weeks are you interested in participating in the Program?		<input type="checkbox"/> 12 weeks	<input type="checkbox"/> 16 weeks		
Top 3 KRESCENT Pre-Approved Supervisors in Order of Preference:					
1.					
2.					
3.					
Do you have a supervisor not listed by KRESCENT?		<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Provide supervisor's name and contact information:					

Statement of Intent (1 page, single spaced, 11 pt font): Describe your interest in kidney research and how you anticipate your career goals will benefit from the Program (Why me, why now; what will this mean to my future; what will this mean to my community).

Note: Previous experience with research is not a requirement for the program; applicants are encouraged to share their motivation to do research as well as any community or cultural experience that may lend to the studentship.

Submission Statement

By submitting to the KRESCENT Summer Studentship Program, I confirm that I will abide by the terms and conditions outlined in the award guidelines and (1) the information on the application is complete and accurate. *The provision of false or inaccurate information may result in sanctions, including the termination of funding and disentitlement from eligibility for future funding* (2) that the information contained in the application forms may be given to persons concerned for the purposes of evaluation on condition that those persons agree to respect the confidential nature of the information (3) that I am eligible to apply as described in award guidelines

☐ By selecting this box, I agree to the Submission Statement above.

Consent Statement

I consent to the collection, use, and disclosure of the personal information requested above, to authorized parties within the Foundation, for the purpose of evaluating my application. The Foundation will treat this information with the strictest confidentiality, ensuring appropriate safeguards to prevent unauthorized use or disclosure. This consent is valid for the time necessary for these purposes and may be withdrawn at any time.

☐ By selecting this box, I agree to the Consent Statement above.