

## Application form for Membership at Ongomiizwin - Research

**NAME:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**CATEGORY OF APPOINTMENT (CHECK ALL THAT APPLY):**

**COMMUNITY-BASED RESEARCHER (INCLUDING GOVERNMENT EMPLOYEE, MP, MLA, ETC)**

**UNIVERSITY-BASED RESEARCHER**

**STUDENT/RESEARCH ASSISTANT**

**PLEASE ENSURE THAT THE FOLLOWING ARE ATTACHED:**

- **PROFILE PHOTO**
- **SHORT BIO (300 WORD MAX) AND/OR LINK TO PERSONAL/PROFESSIONAL WEBPAGE**

I hereby confirm that I have read the Policies and Procedures Manual for Ongomiizwin - Research and agree to comply with all policies and procedures governing the use of its facilities.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SUPERVISOR'S NAME:** \_\_\_\_\_  
**(IF APPLICABLE)**

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*\*Please submit completed applications directly to our office at:*

*Suite 715, John Buhler Research Centre, 727 McDermot Avenue  
or by email to [ongomiizwinresearch@umanitoba.ca](mailto:ongomiizwinresearch@umanitoba.ca)*