 

**APPLICATION FORM**

**JOB TITLE: Aboriginal Women’s Research Initiative (AWRI) Aboriginal Community Research Consultant (ACRC)**

 **[Two positions available in each of ON, MB and SK]**

**If you are a positive Aboriginal woman who wants to make a difference by becoming an ACRC, we invite you to apply through this application process. Women who are Two-Spirit or transgender are encouraged to apply.**

**Please send completed application to lawarren@gmail.com**

**Application deadline Friday June 6, 2014**

1. **Please provide your most up-to-date contact information.**

**Name:**

**Home Phone:**

**Cell phone:**

**Email:**

**Job title (if applicable):**

**Name of agency/organization (if applicable):**

1. **How did you hear about the AWRI position?**

**WCH website \_\_\_**

**Colleague \_\_\_**

**Friend \_\_\_**

**Internet search \_\_\_**

**Job board \_\_\_**

**Aboriginal AIDS Service Organization \_\_\_**

**Community Health Service \_\_\_**

**Other \_\_\_**

1. **Do you have previous research experience? Yes \_\_\_\_ No \_\_\_\_**
2. **Why do you want to be an ACRC on the AWRI Team?**

**(150-250 words)**

1. **Why are you a good fit for this position? (150-250 words)**
2. **Do you have any previous experience as a community research consultant?**
	1. **If yes, please tell us about your experience and what steps you took to include the perspectives of others in the research (150-250 words).**
	2. **If no, could you describe how you would speak to the perspectives of others who have a variety of experiences? (150-250 words)**
3. **Are you willing and able to:**

**1. Attend bi-monthly Skype/phone meetings? Yes \_\_ No\_\_**

**2. Communicate regularly through email? Yes\_\_ No\_\_**

**3. Occasionally travel across Canada for a meeting/conference? Yes \_\_ No\_\_**

1. **Please provide two references from non-relatives. One reference should be from an organization you are affiliated with.**

**1st Reference**

**Name:**

**Relationship to applicant:**

**Email address:**

**Telephone Number:**

**2nd Reference**

**Name:**

**Relationship to applicant:**

**Email address:**

**Telephone Number:**

**9. AWRI Membership Agreement**

**I understand that if I am selected as an ACRC, I will need to attend in person meetings, respond to email/voicemail/text in a timely manner and participate in Skype/teleconference calls.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**

***We would like to thank, in advance, all individuals who take the time to submit an application for this position.***

***All applicants will be notified regarding whether or not they have been selected for an interview.***