

Research Affiliate Appointment Request



Please submit this form together with your current CV to swrc.uregina.ca

Date:

Name:

Educational Level:

Year:

Email Address:

Academic/Non-academic Organization Affiliation(s):

Please describe your research activities and/or research interest OR attach your current CV

Why do you want to join us?

What information do you want to hear from us? Please select ALL that apply

Grant Opportunities

Job Opportunities

Conferences/Presentations

Training Courses

News

Annual Report

Others (Please Specify):