





APPLICATION DEADLINE: FRIDAY, APRIL 26, 2024 11:59 PM

PLEASE READ THE FOLLOWING DETAILS CAREFULLY BEFORE COMPLETING THIS APPLICATION

This course is being planned as an in-person event. Please be advised that we may switch to an online format depending on evolving Covid-19 protocols.

Knowledge Translation Professional Certificate (KTPC)

KTPC is a five-day professional development initiative which builds individual and organizational KT capacity. The curriculum, presented as a composite of didactic and interactive teaching, focuses on the core competencies of Knowledge Translation (KT) work in Canada, as identified by a survey of KT practitioners.

Developed by the Learning Institute, Hospital for Sick Children, KTPC is hosted three times a year. Each session is open to a limited number of participants. KTPC is fully accredited by the Continuing Professional Development Office at the University of Toronto's Faculty of Medicine and has been recognized as a Leading Practice by Accreditation Canada.

Who should take KTPC?

This course aims to develop the competencies of individuals working as KT practitioners (i.e., knowledge brokers, KT specialists, KT managers, and the like) working across all disciplines (e.g., health, health promotion, education, agriculture, etc.).

Time Commitment

Please note that the course is held on five consecutive days (Monday - Friday) from 8:00 am - 6:00 pm and includes a networking dinner on the Wednesday evening. Full attendance is required to meet accreditation requirements.

Supervisor Involvement

Supervisor involvement in three of the course sessions is strongly encouraged as a way to build organizational capacity for KT. Supervisors are invited to attend: 1) a session on *Organizational Impact*, 2) panel discussion: *Building a KT Friendly Organization;* and 3) your KT plan presentation on the final day of the course.

Course Registration

All applicants will be notified about the status of their application by **Friday**, **May 10**, **2024**. Successful applicants will be required to submit payment in full within **one week** of notification of acceptance to secure their space in the course.

APPLICANT INFORMATION

Name:				
Organization:				
Job Title:				
Phone Number:		Alternate Phone Number:	Alternate Phone Number:	
Street:		· · · ·		
City:	Province/State:	Postal Code/Zip Code:		
Country:				
Email Address:				







Before completing this application, please ensure that you can commit to the full 40 hours of training.

PLEASE COMPLETE THE FOLLOWING USING THE SPACE PROVIDED

SECTION A – Knowledge Translation Background

1. What background or training do you already have in knowledge translation? (max 1000 characters with spaces)

2. Briefly describe your current position and knowledge translation responsibilities. (max 1000 characters with spaces)







SECTION B – Objectives

The goal of the KTPC Program is to develop the competencies of knowledge translation professionals. These competencies include, but are not limited to, knowledge translation planning, partnership development, stakeholder engagement, plain language communication and impact evaluation.

3. How will taking this course support your <u>individual professional development</u> goals? What do you hope to achieve by participating?

(max 1000 characters with spaces)

4. How will taking this course build knowledge translation capacity in your organization and support your <u>organization's objectives</u>? How will you use and share the knowledge you gain in your job? (max 1000 characters with spaces)







SECTION C – Abbreviated Resume

Please include key highlights from your resume, in point form, related to knowledge translation in the areas of education, professional development and employment.

(max 1500 characters with spaces)







SECTION D – Supervisor Endorsement* (To be completed by applicant's direct supervisor.)

*This section is not applicable if you are self-employed. 🗌 I am self-employed.

In the space below, please provide your endorsement for the applicant's participation in this course. Specifically, outline why you believe they and your organization will benefit from time invested in knowledge translation professional development.

(max 1000 characters with spaces)

Supervisor's Name (please print)				
Supervisor's Signature	Date			
SECTION E – Application Checklist				
 Confirm your availability to attend all 40 hours of training during the week o Answer the questions above as completely as possible within the space proviewed. Sign and date your application below. 				
 Discuss the supervisor involvement component of the course with your supervisor. Discuss the supervisor involvement component of the course with your supercouraged, but not required. 	. . ,			
Keep a copy of your application for your records.				
Send completed application to Andrea Chiaramida at <u>achiara@sickkids.ca</u> , subject line: KTPC June 2024 Application. You will receive an e-mail confirming receipt of your application. If you do not receive a confirmation within two business days, please follow-up via e-mail.				
Applicant's Signature	Date			
Please submit completed applications to Andrea Chiaramida, Administrative Coordinator, achiara@sickkids.ca, SUBJECT LINE: KTPC June 2024 Application.				
You will receive an e-mail confirming receipt of your application. If you do not receive a co	onfirmation within two business days, please			

follow-up via e-mail.