



## APPLICATION FOR CROSH MEMBERSHIP INFORMATION

The Centre for Research in Occupational Safety and Health (CROSH) is pleased to know of your interest in our Centre. Applications are reviewed three times per year and we have identified the following four membership categories to best suit the needs of CROSH and its members. The categories are listed below as well as their respective roles and responsibilities:

### Faculty Members

Any independent researcher who is a faculty member or a post doctoral research fellow from a recognized, post-secondary institution may apply to be a Full member of CROSH, if they agree to:

- contribute positively to CROSH's mission;
- participate in the promotion of CROSH by acknowledging CROSH in research publications and presentations which benefited from CROSH support and partnerships;
- seek opportunities to collaborate with other CROSH researchers;
- accept CROSH's financial guidelines;
- attend General Membership meetings; and
- submit CV, annually (by May 15<sup>th</sup>), for the Centre's Annual Report.

### Graduate Student Members

Any graduate student at a recognized post-secondary institution may apply for Graduate Student membership if they agree to:

- contribute positively to CROSH's mission;
- participate in the promotion of CROSH by acknowledging CROSH in research publications and presentations which benefited from CROSH support and partnerships;
- seek opportunities to collaborate with CROSH researchers including other graduate students;
- follow the rules governing the use of the CROSH laboratory;
- accept CROSH's financial guidelines; and
- attend General Membership meetings; and
- submit CV, annually (by May 15<sup>th</sup>), for the Centre's Annual Report.

### Undergraduate Student Members

Any undergraduate student at a recognized post-secondary institution may apply for Undergraduate Student membership if they agree to:

- contribute positively to CROSH's mission;
- participate in the promotion of CROSH by acknowledging CROSH in research publications and presentations which benefited from CROSH support and partnerships;
- seek opportunities to collaborate with CROSH researchers including other students;
- follow the rules governing the use of the CROSH laboratory;
- accept CROSH's financial guidelines; and
- attend General Membership meetings.

## **Affiliate Members**

Any person with an interest in occupational health and safety research, who is not registered as a student or employed as a faculty at a post secondary institution, is eligible to be an Affiliated Member of CROSH if they agree to:

- submit signed sponsorship form (Appendix A)
- contribute positively to CROSH's mission;
- participate in the promotion of CROSH by acknowledging CROSH in research publications and presentations which benefited from CROSH support and partnerships;
- seek opportunities to collaborate with CROSH researchers; and
- attend General Membership meetings; and
- submit CV, annually (by May 15<sup>th</sup>), for the Centre's Annual Report

## **Application Process**

The membership sub-committee at CROSH welcomes your application. The CROSH membership sub-committee reviews all applications and will inform you of your status after its next meeting. If you wish to be considered for CROSH membership please complete the attached membership application form.

The membership sub-committee retains the right to terminate or suspend any membership. These decisions are guided by our mission, vision and values document that you can find on the CROSH website ([www.crosh.ca](http://www.crosh.ca)).

## **Questions**

All direct questions regarding CROSH membership can be directed first to Giselle Thrush, (Administrative Assistant for CROSH), then to the Chair of the CROSH Membership sub-committee:

### **Giselle Thrush**

Administrative Assistant  
[gthrush@laurentian.ca](mailto:gthrush@laurentian.ca)  
705-675-1151 ex. 1422

### **Dr. Alison Godwin**

Associate Director, CROSH  
[agodwin@laurentian.ca](mailto:agodwin@laurentian.ca)

## Centre for Research in Occupational Safety and Health MEMBERSHIP APPLICATION FORM

1. Indicate the membership category you wish to be considered for by checking the appropriate box below:

I would like to be a CROSH <b>Faculty</b> member	<input type="checkbox"/>
I would like to be a CROSH <b>Graduate Student</b> member	<input type="checkbox"/>
I would like to be a CROSH <b>Undergraduate Student</b> member	<input type="checkbox"/>
I would like to be a CROSH <b>Affiliate</b> member (**sponsorship required)	<input type="checkbox"/>

2. Complete the following information:

Name:	
Title:	
Program/Affiliation:	
Year in Program: (Students only)	
Email:	

3. Additional requirements:

Membership Category	Documentation Required
Faculty Member	<ul style="list-style-type: none"> <li>Statement of interest (250 words max)</li> <li>Curriculum Vitae</li> </ul>
Affiliate Member	<ul style="list-style-type: none"> <li>Research Partner (name) who supports your application for membership</li> <li>Sponsorship document signed and submitted with application (See Appendix A)</li> <li>Curriculum Vitae (Resume)</li> <li>Statement of interest (250 words max)</li> </ul>
Graduate Student Undergraduate Student	<ul style="list-style-type: none"> <li>Program and year of study</li> <li>Supervisor (name) who supports your application for membership</li> <li>Curriculum Vitae (Resume)</li> <li>Statement of interest (250 words max)</li> </ul>

4. Sign and date this form to confirm your interest in applying for a CROSH membership

Signature	Date

5. Submit this form and supporting documents by email or mail to:

<b>Email</b>	<a href="mailto:crosh@laurentian.ca">crosh@laurentian.ca</a> or <a href="mailto:gthrush@laurentian.ca">gthrush@laurentian.ca</a>
<b>Mail</b>	CROSH - Laurentian University, 935 Ramsey Lake Rd, Sudbury, ON P3E 2C6



## Appendix A

### CROSH Student Membership Sponsor FORM

Student Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

I \_\_\_\_\_, have communicated with the student named above and I am willing to serve as the Sponsor for the student if they are successful with their membership application submitted to the Centre for Research in Occupational Safety and Health (CROSH).

Term of Sponsorship: \_\_\_\_\_

Faculty Members Name: \_\_\_\_\_

Faculty Members Signature: \_\_\_\_\_

Date: \_\_\_\_\_

This form was completed:

\_\_\_\_\_ in Person

\_\_\_\_\_ via email