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| **CHIPER Member Profile/ Skills Matrix** | | |  |
| Full Name |  | | |
| Primary Institution |  | | |
| Citizenship |  | | |
| **Equity, Diversion, and Inclusion Questions (OPTIONAL)** | | | |
| Please select the option you identify with: | | Woman  Man  I identify as  Non-binary  Prefer not to answer | |
| Do you identify as Indigenous (First Nation North American Indian, Metis, or Inuit)?  If “Yes”, please select the options that you identify with. | | Yes  No  Prefer not to answer  First Nations  Métis  Inuit  Prefer not to answer | |
| Do you identify as a person with a disability? | | *Note: person with a disability is a person who has a long-term or recurring physical, mental, sensory, psychiatric or learning impairment and: (i) Who considers themselves to be disadvantaged in employment by reason of that impairment, or (ii) Who believes that an employer or potential employer is likely to consider them to be disadvantaged in employment by reason of that impairment; and (iii) Includes persons whose functional limitations owing to their impairment may have been accommodated in their current job or workplace.*  Yes  No  Prefer not to answer | |
| Do you identify as a member of a visible minority? | | *Note: visible minority refers to whether a person belongs to a visible minority group as defined by the Employment Equity Act and, if so, the visible minority group to which the person belongs. The Employment Equity Act defines visible minorities as “persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour.”*  Yes  No  Prefer not to answer  If yes, please specify:  Prefer not to answer | |
| Do you live outside the [Winnipeg Metropolitan Region](https://winnipegmetroregion.ca/about-us/)? | | Yes  No  Prefer not to answer  If yes, please specify:  Prefer not to answer | |
| **Skills & Professional Background** | | | |
| **Industry / Specialty**  **(check all that apply)** | | Complimentary or Alternative Health Care  Disability/Accessibility Issues  Cannabis Research  Infectious Diseases  Rehabilitation Medicine  Dentistry/Dental Health  Pharmacy/Pharmacology  Nursing  Pediatrics  Clinical Trials  Hematology/Oncology  Radiology  Qualitative Research  General Medicine Clinician  Surgeon  Psychiatrist/Clinical Psychologist  Population Health  Archivist  Lawyer  Formal Ethicist  Community Member/Layperson/Patient Representative, please add your profession:  Other skills/professional background, please specify: | |
| **Knowledge of**  **(check all that apply)** | | Indigenous research perspectives (e.g., OCAP principles, etc.)  Administrative health data    The Personal Health Information Act    Manitoba Centre for Health Policy    Clinical Datasets    Transferring data between institutions for research purposes | |
| **Personal attributes for successful CHIPER operations** | | High level of integrity (absence of personal bias in group deliberations)  Commitment to continuous learning  Effective committee contribution skills (active participation in group discussions)  Peer review experience  Willingness and availability to participate in virtual meetings  Willingness to use an electronic research administration system to conduct reviews | |
| **We want to hear from you! Please add any additional comments here** | |  | |