

19. EXTERNAL REVIEWERS		
<i>Please suggest the names of two or three impartial reviewers who have the necessary expertise to critically evaluate your application and with whom you do not collaborate. The Research Secretariat may or may not use these reviewers to review your proposal.</i>		
Surname	Given Name and Initial	Title <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Other
Area of Expertise		
Institution	Department	
Street Address		
City and Province / State		Postal / Zip Code
Telephone	E-mail Address	
Surname	Given Name and Initial	Title <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Other
Area of Expertise		
Institution	Department	
Street Address		
City and Province / State		Postal / Zip Code
Telephone	E-mail Address	
Surname	Given Name and Initial	Title <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Other
Area of Expertise		
Institution	Department	
Street Address		
City and Province / State		Postal / Zip Code
Telephone	E-mail Address	

Please list people who should NOT act as external reviewers.

Name	Reason for exclusion
Name	Reason for exclusion

Identify 2 or 3 possible reviewers.

- they must be impartial

- watch out for Conflict of Interest