**Irish Research Council**

**Researcher of the Year Award 2017**

**Nomination Form – Category 3 (Early-career Researcher of the Year)**

**Completed Forms Not to Exceed 5 Pages.** Use Calibri 11.5 Font, Dates as MM-YY

**NAME**

**CURRENT POSITION**

DATE Role, faculty, HEI/organisation country

**RESEARCHER UNIQUE IDENTIFIER (E.G. ORCID, RESEARCH ID, ETC.)**

**PHD**

DATE *(of conferring)* Awarding institution

1. **EXCELLENCE IN RESEARCH – evaluated on the basis of track record appropriate to career stage**

List a maximum of three publications for which you were lead author and describe how each one made an impact in your field of research.

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| --- | --- | --- | --- |
| **Title of lead-authored work** | **Type of publication** | **Journal/series/ Publisher as relevant** | **Impact of work** |
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List a maximum of three competitively acquired, research awards (may include national and international acknowledgements, research awards secured, fellowships, medals etc.).

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| --- | --- | --- | --- |
| **Research Award** | **Value** | **Duration** | **Outputs/Impact** |
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|  |  |  |  |

**PATENTS/LICENSES (if applicable).**

DATE Name

1. **POTENTIAL TO BE A LEADER IN THEIR FIELD**

**SUPERVISION OF GRADUATE STUDENTS AND POSTDOCTORAL FELLOWS (if applicable).**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Faculty/Department Name of Institution, Country** | **Master students** | **PhD students** | **Postdoctoral Fellows** |
| Ongoing | Completed | Ongoing | Completed | Ongoing | Completed |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**INSTITUTIONAL RESPONSIBILITIES (if applicable)**

DATE Specify role, e.g. Faculty member, member of the Faculty committee

**TEACHING ACTIVITIES (if applicable)**

DATE Teaching position – module, Name of Faculty/Department, Name of Institution, Country

**MAJOR COLLABORATIONS (if applicable)**

DATE Name of collaborators, topic, name of faculty/department, name of institution, country

**MEMBERSHIP OF SOCIETIES (if applicable)**

DATE Type of membership/role, name of society/network

**COMMISSIONS OF TRUST (if applicable)**

DATE Reviewer; Editorial Board member, etc.

 Name of Faculty/Department, Name of Institution, Country

**EVIDENCE-BASED STATEMENT OF LEADERSHIP POTENTIAL**

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1. **COMMUNICATION – Demonstration of commitment and ability to communicate the nature and impact of their research beyond their peers:**

**OUTREACH ACTIVITIES (If applicable)**

DATE Please specify your role; name of event; type of event; number of participants; country

**EVENT ORGANISATION (if applicable)**

DATE Please specify your role; name of event; type of event; number of participants; country

**COMMUNITY/INDUSTRY ENGAGEMENT (if applicable)**

DATE Please specify your role; name of event; type of event; number of participants; country

**CONFERENCE PRESENTATIONS (if applicable)**

DATE CONFERENCE TITLE

**OTHER EVIDENCE (if applicable)**

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