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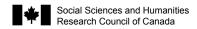
		Internal use	CID (if know	n)				
		292812	105633					
Identification								
Only the information in the Name section will be made available to selection committee members and external assessors. Citizenship and Statistical and Administrative Information will be used by SSHRC for administrative and statistical purposes only. Filling out the statistical and Administrative Information section is optional.								
Name								
Family name	Given name		Initials	Title				
Burkell	Jacquelyn		A	Dr.				

			Information will be used on section is optional.	by SS	SHRC for administrative and statistical pur	poses or	nly. Filling o	ut the statistical
Name								
Family name				Give	n name		Initials	Title
Burkell				Jaco	quelyn	A	Dr.	
Citizens	hip - Ap	plicants a	and co-applicants must ir	ndicate	e their citizenship status by checking and a	answerin	g the applic	able questions.
Citizenship Canadian Permanent resident since (yyyy/mm/dd)				ince	Other (country)			you applied for anent residency?
							\bigcirc Y	es No
				•				
Statistic	al and	Admini	strative Informatio	n				
Birth year	Gender		Permanent postal code in Canada (i.e. K2P1G4)		orrespondence language		is contact w plicant, asse	ith SSHRC? essor, etc.)
1959	● F	\bigcirc M	N6A5B7		● English		Yes	● No
Full name (used duri	ng previo	us contact, if different fro	m abo	ove			
0	. I.a.£ a							

The follo		ormation formation will help us to cont t.	act you more rapidly. Se	condary ir	nformatio	on will not be releas	ed by SSHRC without your
Primary	telepho	ne number		Second	ary telep	hone number	
Country code	Area code	Number	Extension	Country code	Area code	Number	Extension
	519	661-2111	88506				
Primary fax number			Secondary fax number				
Country code	Area code	Number	Extension	Country code	Area code	Number	Extension
	519	661-3506					
Primary	E-mail	jburkell@uwo.ca					
Second	ary E-ma	ail					

2013/06/14 Canadä

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Family name, Given name
Burkell, Jacquelyn

Current Address Use only if you are not affiliated with a university. (If you are affiliated with a university, the department's mailing a wish to use another address, specify in Address.	department at a ddress will be u	a Canadian used.) If you	Correspondence Address Complete this section if you wish your correspondence to be sent to an address other than your current address.				
Address			Address				
City/Municipality	Prov. / State	Postal/Zip code	City/Municipality	Prov. / State	Postal/Zip code		
Country CANADA	•	•	Country	•			
Temporary Address If providing a temporary address, pho ensure that you enter the effective da	ne number and tes.	/or E-mail,	Permanent Address in	n CANADA			
Address			Address				
City/Municipality		City/Municipality	Prov. State				
Country	•		Country				
Start date End date (yyyy/mm/dd) (yyyy/mm/dd)			Temporary telephone/fax number Country Area Number code code	Extensio	n		
Temporary E-mail							

 $\label{personal information will be stored in the Personal Information Bank for the appropriate program. \\$



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Conseil de recherches en sciences humaines du Canada

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Family name, Given name Burkell, Jacquelyn

Research Expertise (or	otional)
------------------------	----------

The information provided in this section refers to your own research expertise, not to a research proposal. Filling out the following 4 sections is optional. This page will not be seen by selection committee members and external assessors. This section will be used for planning and evaluating programs, producing statistics, and selecting external assessors and committee members.

Areas of Research

Indicate and rank up to 3 areas of research that best correspond to your research interests as well as areas where your research interests would apply. Duplicate entries are not permitted.

Rank	Code	Area
1	120	Communication
2	220	Health
3	360	Science and technology

Temporal Periods

If applicable, indicate up to 2 historical periods covered by your research interests.

From	То
Year	Year
BC AD	BC AD
O O	O O
O O	O O

Geographical Regions

If applicable, indicate and rank up to 3 geographical regions covered by your research interests. Duplicate entries are not permitted.

-	,	
Rank	Code	Region
1		
2		
3		

Countries

If applicable, indicate and rank up to 5 countries covered by your research interests. Duplicate entries are not permitted.

Rank	Code	Countries	Prov./ State
1			
2			
3			
4			
5			

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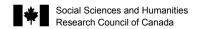
Conseil de recherches en sciences humaines du Canada

Curriculum Vitae

Family name, Given name

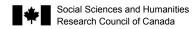
Burkell, Jacquelyn

Language Pro	oficiency							
Read	Write	Speak	Comprehend a	urally	Other lan	guages		
English X French	X -	X	X					
_								
Work Experie		rademic v	ou have held hegi	nning with the	ourrent no	sition and all previous	nocitions in re	verse
chronological order,			od nave neid begi	ining with the	z current pe	Sition and all previous	positions in re	200130
Current position								Start date (yyyy/mm)
Associate Prof	fessor							2005/7
Org. code	Full organization	name						
1351211	The Univers	ity of W	estern Ontario)				
Department/Division	n name							
Faculty of Info	ormation and l	Media St	rudies					
Position type (Tenured	O No	on-tenure	Employmen	t status	Full-time	O Part-tii	me
(Tenure-track	○ No	on-academic			Non-salaried	Leave	of absence
Position							Start date (yyyy/mm)	End date (yyyy/mm)
							2005/7	
Org. code	Full organization	name						
1351211	The Univers	sity of W	estern Ontari	o				
Department/Division	n name							
Faculty of Info	ormation and l	Media St	cudies					
Position							Start date (yyyy/mm)	End date (yyyy/mm)
Researcher							1995/7	1998/7
Org. code	Full organization	name						
1351211	The Univers	sity of W	estern Ontari	.0				
Department/division	name							
Centre for Cog	gnitive Science	e						
Position							Start date (yyyy/mm)	End date (yyyy/mm)
Research Asso	ociate						1994/7	1994/7
Org. code	Full organization	name						
1	Drug and A	lcohol R	egistry of Tre	atment				
Department/Division	n name	· ·						
n/a								
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Family name, Given name
Burkell, Jacquelyn

Work Experience	ence (cont'd)		
Position		Start date (yyyy/mm)	End date (yyyy/mm)
Research Cons	ultant	1992/7	1998/7
Org. code	Full organization name		
1	Parkwood Hospital, London		
Department/Division	name		
Research Depa	rtment		
Position		Start date (yyyy/mm)	End date (yyyy/mm)
Co-ordinator		1992/7	1994/7
Org. code	Full organization name		
1	Huron County Coordinating Committee Against Woman Abuse		
Department/Division	name		
Community Av	wareness of Woman Abuse Project		
Position		Start date (yyyy/mm)	End date (yyyy/mm)
		()))	()))
Org. code	Full organization name		
Department/Division	name		
Position		Start date (yyyy/mm)	End date (yyyy/mm)
		,	,
Org. code	Full organization name		
Department/Division	name		
Position		Start date (yyyy/mm)	End date (yyyy/mm)
		(),,,,	()))
Org. code	Full organization name		
Department/Division	name		

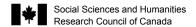


Family name, Given name
Burkell, Jacquelyn

Academic Ba						
List up to 5 degrees, beginning with the highest degree first and all others in reverse chronological order, based on the start date.						
Degree type	Degree name	Start date (yyyy/mm)	Expected date (yyyy/mm)	(yyyy/mm)		
Doctorate		1986/09		1993/06		
Disc. code	Discipline		Did SSHRC su you to get this			
63000	Psychology		Yes	● No		
Org. code	Organization					
1351211	The University of Western Ontario					
CANAD CANAD	OA .					
Degree type	Degree name	Start date	Expected date	Awarded date		
N		(yyyy/mm)	(yyyy/mm)	(yyyy/mm)		
Master's	Dischaller	1984/09	Did CCHDC ou	1986/06		
Disc. code	Discipline		Did SSHRC su you to get this	degree?		
63000	Psychology		Yes	● No		
Org. code	Organization					
1351211	The University of Western Ontario					
CANAD)A					
Degree type	Degree name	Start date	Expected date	Awarded date		
BA Hon.		(yyyy/mm) 1977/09	(yyyy/mm)	(yyyy/mm) 1981/06		
Disc. code	Discipline		Did SSHRC su you to get this			
63000	Psychology		Yes	● No		
Org. code	Organization					
1351211	The University of Western Ontario					
CANAD	OA .					
Degree type	Degree name	Start date (yyyy/mm)	Expected date (yyyy/mm)	Awarded date (yyyy/mm)		
Disc. code	Discipline		Did SSHRC su			
			Yes	○ No		
Org. code	Organization					
Country						
Degree type	Degree name	Start date	Expected date	Awarded date		
		(yyyy/mm)	(yyyy/mm)	(yyyy/mm)		
Disc. code	Discipline		Did SSHRC su			
			you to get this	degree?		
Org. code	Organization			$\overline{}$		
Country						

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Family name, Given name
Burkell, Jacquelyn

Credentials

List up to 6 licences, professional designations, awards and distinctions you have received and feel would be the most pertinent to the adjudication of your application. List them in reverse chronological order, based on the year awarded.

Category	Name	Source or Country	Duration (Months)	Value / Year awarded
Professional Designation	USC Teaching Honour Roll	CANADA		2000
Graduate Scholarship	Information Technology Research Council	CANADA		1988
Graduate Scholarship	NSERC Postgraduate Scholarship	CANADA		1986
Graduate Scholarship	Univ of Western ON Graduate Entrance Scholarship	CANADA		1984

Research Expertise

The information provided in this section refers to your own research expertise, not to a research proposal.

Keywords

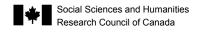
List keywords that best describe your areas of research expertise. Separate keywords with a semicolon.

information needs and uses; online privacy; cognitive psychology; decision making; consumer health information;

Disciplines

Indicate and rank up to 5 disciplines that best correspond to your research interests. Duplicate entries are not permitted.

Rank	Code	Discipline	If Other, specify
1	63099	Other Psychology	Cognition
2	51299	Other Library and Information Science	Information needs and uses
3	50600	Communications and Media Studies	
4			
5			



Family name, Given name	
Burkell, Jacquelyn	

Funded Research					
List up to 8 grants or contracts you have received from SSHRC or other sources. List them in reverse chronological order, based on the year awarded. If you are not the applicant (principal investigator), specify that persons' name.					
Org. code	Full name of funding organization	Year awarded		tal amount (CAN\$)	
1	Privacy Commissioner of Canada		2013		50,000
Role	A1'4				
	Applicant	YY 1.1 YY 1 '.	Completion statu	<u>s Ц</u>	Complete
Project title	Hidden Surveillance on Consumer	Health Websites			
Applicant's f	amily name	Applicant's given name	n name Initials		
Org. code	Full name of funding organization		Year awarded		tal amount
2010225	Social Sciences and Humanities R	Lesearch Council of Canada	(yyyy) 2011		(CAN\$)
3010325			2011		199,992
Role	Co-applicant		Completion statu	s	Complete
Project title	The e-girls project				
Applicant's f	amily name	Applicant's given name			Initials
Steeves		Valerie			
Org. code	Full name of funding organization		Year awarded		tal amount
	The Privacy Commissioner of Car	nada	(yyyy) 2011		(CAN\$)
1			2011		49,000
Role	Applicant		Completion statu	s X	Complete
Project title The view from here: Privacy Expectations in online social networks					
Applicant's f	amily name	Applicant's given name			Initials
Org. code	Full name of funding organization		Year awarded		tal amount
Social Sciences and Humanities Research Council of Canada			(yyyy)		(CAN\$)
3010325			2010 \$24,933		
Role Co-applicant			Completion statu	s X	Complete
Project title Mobilizing User-Generated Content for Canada's Digital Content Advantage					
Applicant's f	amily name	Applicant's given name			Initials
Trosow		Sam			E

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Family name, Given name	
Burkell, Jacquelyn	

Funded Research (cont'd)				
Org. code				Total amount (CAN\$)
3010325	Social Sciences and Humanities R	Research Council of Canada	2009	\$2,969,000
Role	Collaborator		Completion statu	s Complete
Project title	GRAND: Graphics, Animation, an	nd New Media NCE		
Applicant's f	amily name	Applicant's given name		Initials
Booth		Kelly		
Org. code	Full name of funding organization		Year awarded	Total amount
1	Canadian Blood Services		2009	(CAN\$) \$272,125
Role	Co amiliant			
Project title	Co-applicant Health Policy Analysis Organ Do	anation Consont	Completion statu	s X Complete
1 Toject title	Health Policy Analysis - Organ Do	onation Consent		
_				
Applicant's f	amily name	Applicant's given name		Initials
Shemie		Sam		
Org. code	Full name of funding organization		Year awarded (yyyy)	Total amount (CAN\$)
1	Office of the Privacy Commission	ner of Canada	2006	\$49,000
Role	Compliant		Completion statu	_ <u></u>
Project title	Co-applicant Strategies for drafting privacy poli	aias kids aan undarstand	Completion statu	S Complete
i roject and	Strategies for drafting privacy poin	cies kius can understand		
_				
Applicant's f	amily name	Applicant's given name		Initials
Burkell		Jacquelyn		
Org. code	Full name of funding organization		Year awarded (yyyy)	Total amount (CAN\$)
3010325	Social Sciences and Humanities Research Council of Canada		2003	\$2,969,584
		Completion status X Complete		
Role Co-applicant Completion status X Complete Project title On the identity trail: understanding the importance and impact of anonymity and				
authentication in a networked society				
Applicant's f	amily name	Applicant's given name		Initials
Kerr		Ian		R

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