

ROMEIO Investigator Profile – Registration Form

1. Please return to research@iwk.nshealth.ca for processing by IWK or nsharomeo-systemadmin@nshealth.ca for processing by NS Health, subject line "**ROMEIO - New User.**"
2. You'll receive an automated email "**Researcher Portal Registration Confirmation.**" Follow the directions to reset your password. **Please check you junk/spam folders, and add nsharomeo-systemadmin@nshealth.ca to your safe senders list.**

1. Prefix of choice (i.e. Dr., Mrs.)

2. Last Name:

3. First Name:

4. Current Position:

5. Email address:

***Please use business or university email only*

6. PRIMARY institutional affiliation (choose one):

IWK Health Center
Nova Scotia Health
Dalhousie University
Other:

6. Department and/or Division of PRIMARY affiliation:

7. Address of PRIMARY affiliation:

8. SECONDARY Institutional affiliation (choose one):

IWK Health Center
Nova Scotia Health
Dalhousie University
Other:

9. Department and/or Division of SECONDARY affiliation: