

## ROMEIO Investigator Profile – Registration Form

1. Please return form to [research@iwk.nshealth.ca](mailto:research@iwk.nshealth.ca) for processing by the IWK or [nsharomeo-systemadmin@nshealth.ca](mailto:nsharomeo-systemadmin@nshealth.ca) for processing by NS Health with the email subject line "**ROMEIO - New User.**"
2. You will receive an automated email titled "**Researcher Portal Registration Confirmation.**" Follow the directions to reset your password.

1. Last Name:

2. First Name:

3. Current Position:

4. Email address:

5. 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: