

Family name of student: \_\_\_\_\_

Given name of student: \_\_\_\_\_

Current address:	Permanent mailing address (if different from current address):
If current address is temporary, indicate leaving date: _____	Telephone number at permanent mailing address: _____
Telephone number at current address: _____	E-mail address: _____

## Academic Background

Include post-secondary degrees, completed or in progress

Degree	Institution	Department	Start date (mm/yyyy)	Completion date (expected or actual) (mm/yyyy)

Which of the following are you pursuing at the time of applying?

Bachelor's      Master's      PhD      Post-Doc

If you receive a GRASP Award, which degree will you be pursuing while you hold this award?

Master's      PhD      Post-Doc

When is/was your official start date for this program (dd/mm/yyyy)? \_\_\_\_\_

Proposed starting date of award (dd/mm/yyyy): \_\_\_\_\_

**Academic, research, and other relevant work experience**

Starting with your most recent, list all work experience you have which may be of relevance to this application. You may list up to 10 items.

<b>Position held/role</b>	<b>Organization and department</b>	<b>Supervisor</b>	<b>Period (mm/yyyy-mm/yyyy)</b>

**Scholarships and Awards received and requested**

Starting with your most recent, list scholarships/awards you have received (including those declined), as well as those which you have applied for and are awaiting results. You may list up to 15 scholarships and awards.

<b>Name of award</b>	<b>Start Date (mm/yyyy)</b>	<b>End Date (mm/yyyy)</b>	<b>Value (per year, if applicable)</b>

## **Supervisor**

Name and title of supervisor:	E-mail address of supervisor:
Address at location of award tenure:	Telephone number of supervisor:
	Fax number of supervisor:
	Institution that will administer the award:
	Department:

## **Co-supervisor**

Only complete this section if you have a co-supervisor for your degree

Name and title of co-supervisor:	E-mail address of co-supervisor:
Address of co-supervisor:	Telephone number of co-supervisor:
	Fax number of co-supervisor:
	Department of co-supervisor:

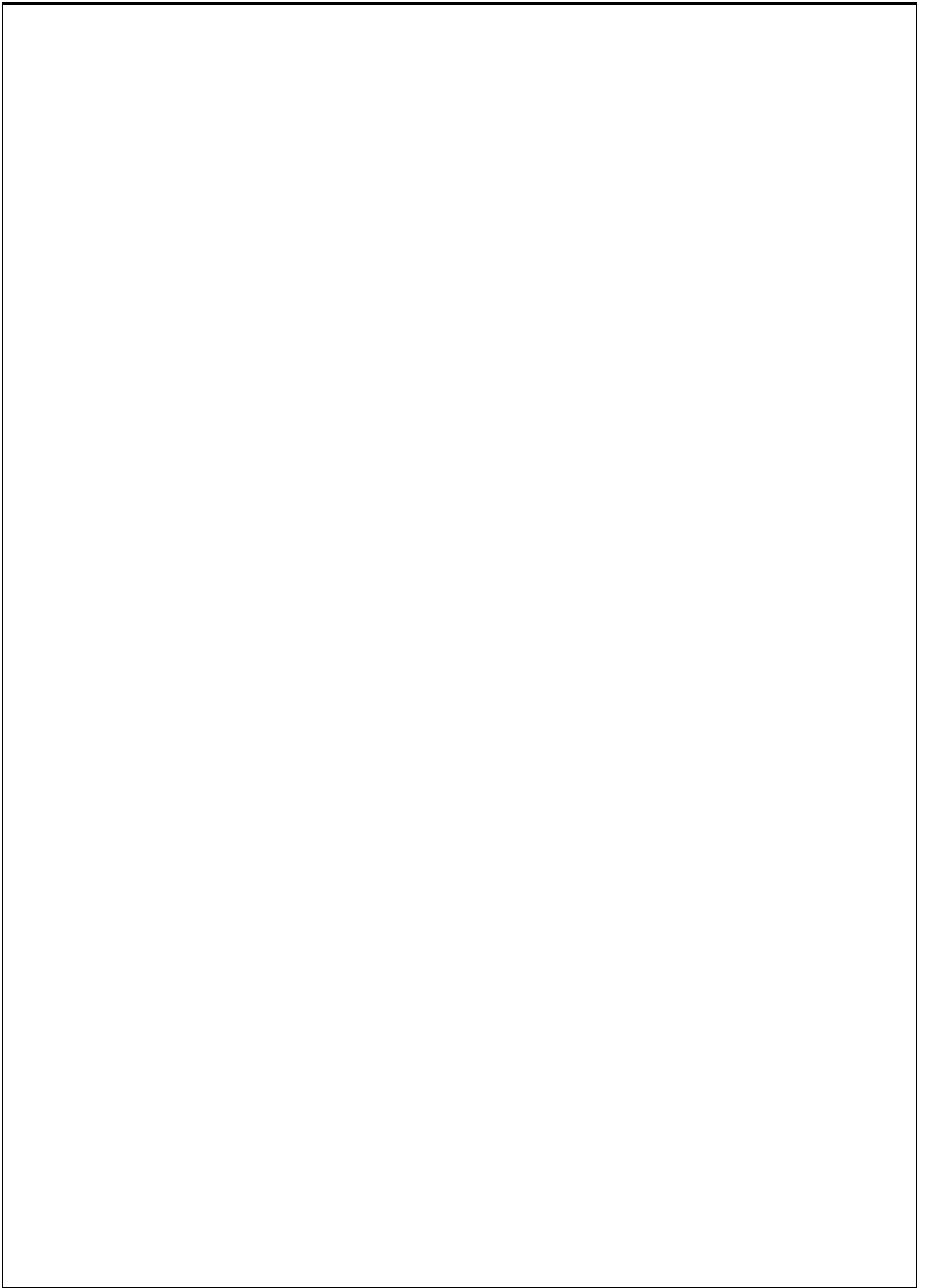
## **Project Proposal**

Complete the following sections in consultation with your supervisor.

<b>List up to 10 words that describe your project</b>	
1,	6.
2.	7.
3.	8.
4.	9.
5.	10.

**Project Title:**

Proposal (must be 8000 characters or less, including spaces)



## **Attachments**

The following should be included in your application as PDF files. Applications lacking these attachments will be considered incomplete.

**-Contributions** (max 2 pages). In 2 pages or less (margins of 2.5 cm or more, single-spaced, font style Times New Roman and size 12), list the following:

**1) Publications** (under the following headings: Peer-reviewed articles, books or book chapters, research reports, patents, abstracts & meeting proceedings, Lay articles in health research, non-peer-reviewed articles, invited lectures, oral presentations, poster presentations). Exclude headings which do not apply, and do not include work that is “in preparation”. For items which are “submitted” or “in press”, please provide as an additional attachment the appropriate letter from the editor.

**2) Relevant activities.** Describe your professional and extracurricular activities that most demonstrate your communication, interpersonal, and leadership skills.

**3) Special Circumstances.** Describe any special considerations that may have influenced your performance or productivity in past experiences (work, part-time studies, medical leave, parental leave, etc.).

**-Transcript(s).** Provide a copy of transcripts for all post-secondary studies. Note that while a PDF is needed for application, successful applicants will be required to provide an official university transcript prior to the beginning of their award.