

Application for
UNIVERSITY OF MANITOBA GRADUATE FELLOWSHIP
DEPARTMENT DEADLINE: April 15, 2019

PART I

| | | | |
|-------|------------------------|------------|----------------------------|
| Title | Last Name of Applicant | First Name | Initial of all given names |
|-------|------------------------|------------|----------------------------|

ADDRESSES

| | | | |
|--|--------------------|--|--|
| Current address (street name & number/City/Province/Postal Code) | | Permanent mailing address (if different than current address) (street name & number/City/Province/Postal Code) | |
| If current address is temporary, indicate leaving date | | Telephone number at permanent mailing address | |
| Telephone number | Facsimile number | E-mail address | |
| U of M student # | Present Department | Present Institution | |

CITIZENSHIP

| | | |
|------------------|------------------------------|--------------|
| Canadian Citizen | Permanent resident of Canada | Visa student |
|------------------|------------------------------|--------------|

SIGNATURE

I hereby agree that any award made to me as a result of this application will be subject to the general conditions governing the UMGF. These conditions are outlined in the regulations attached to this application form, as well as the regulations outlined in the *Award Holder's Guide*.

I hereby certify that I have read and understood the instructions and information sheet attached to this application form and that all statements made in connection with this application are true and complete.

I authorize the university to verify any information, transcripts, or reference letters provided as part of this application.

I understand that my application will be rejected if I have not disclosed my complete academic record or have submitted false information in support of my application to the Faculty of Graduate Studies. In such an event I understand that future applications from me will not be considered.

Date

Signature of Applicant

This personal information is being collected under the authority of *The University of Manitoba Act* and will be used for the purpose of assessing your application for the UMGF competition. It may be shared with other educational institutions. Information regarding graduation and awards may be made public. Upon your graduation, name, address and degree information you have provided will be given to and maintained by the Alumni Records department in order to assist in the University's advancement and development efforts. This information is protected by the Protection of Privacy provisions of Manitoba's *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, contact the FIPPA Coordinator's Office (204) 474-8339, c/o Archives and Special Collections, 331 Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.

| Last Name of Applicant | | | First Name | | |
|---|-----------------------------|-------------------------------------|----------------------------|---------------------------------|----------------|
| ACADEMIC BACKGROUND (current and past degree programs including in programs in progress) | | | | | |
| Degree | Name of discipline | Department, Institution and country | Month and year started | Month and year awarded/expected | Status (PT/FT) |
| Bachelor's | | | | | |
| Master's | | | | | |
| Doctorate | | | | | |
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| ACADEMIC, RESEARCH, CREATIVE WORKS AND OTHER RELEVANT WORK EXPERIENCE | | | | | |
| Position held and nature of work (begin with current) | Organization and department | Supervisor | Period (mm/yyyy – mm/yyyy) | | |
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|---|------------|-------------------------------|
| Last Name of Applicant | | First Name |
| AWARDS & SCHOLARSHIPS RECEIVED (indicate whether they are national, provincial, or institutional) | | |
| Award & Value | University | Period (mm/yyyy – mm/yyyy) |
| | | |

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|---|---------------------|
| Last Name of Applicant | First Name |
| AWARDS APPLIED FOR (Please note that in order to be considered for the UMGF eligible students are expected to apply to NSERC, SSHRC, CIHR & MHRC) | |
| Award | Year applied for |
| | |
| PROPOSED LOCATION OF TENURE (in order of preference) | |
| Department | Proposed Advisor |
| | |
| Indicate if you are attending university at the time of application | |
| Attending part-time | Attending full-time |
| Not attending | |
| I propose to study for | |
| Ph.D. degree | Master's degree |

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|---|------------|
| Last Name of Applicant | First Name |
| PUBLICATIONS (List papers published in refereed journals, book and proceedings, beginning with the most recent. <u>One additional page</u> may be appended if needed). | |
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|---|------------|------------------------------------|
| Last Name of Applicant | | First Name |
| THESIS COMPLETED OR IN PROGRESS | | |
| 1. Degree | Supervisor | Date degree requirements completed |
| Title of thesis | | |
| 2. Degree | Supervisor | Date degree requirements completed |
| Title of thesis | | |
| <p>Please provide a brief statement of your proposed academic research and objectives (both short term and long term), and expected area of study. This statement must be authored and written by the applicant. Your statement must be understandable to someone outside of your field. Use plain language and do not reproduce abstract of thesis. (<u>Only one additional page</u> including references may be appended using 12 pt. Font with 6 lines per inch.)</p> | | |

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|---|---------------|---------------------|----------------|
| Last Name of Applicant | | First Name | |
| REFEREES Provide information on one referee who will complete Part II of the application and will submit a letter of support. If you do not have a "University of Manitoba Academic Record", you may append one extra letter of reference from a person most knowledgeable about your academic work. | | | |
| Last Name | | First Name | |
| Position | | Department/Division | |
| Institution | | | |
| Telephone No. | Facsimile No. | | E-mail address |
| Last Name | | First Name | |
| Position | | Department/Division | |
| Institution | | | |
| Telephone No. | Facsimile No. | | E-mail address |
| UNIVERSITY TRANSCRIPTS List all university transcripts appended to this application. You must include all undergraduate and graduate transcripts. Only official transcripts, "student histories" from the Registrar's Office and certified true copies are acceptable. Web printouts and Student Aurora printouts are not acceptable. These documents must be sealed upon receipt at the departmental level. | | | |
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