

Science Undergraduate Research Award: SUMMER 2015

Office for Undergraduate Research in Science

SURA Application Form: Part 1, Student

Tel.: 514-398-5964 / Fax: 514-398-8102

Version: 201502

Dawson Hall, Room 408-A / www.mcgill.ca/science/research/ours/

Instructions

- **PLEASE TYPE**
- For **forms** and **eligibility**, please refer to www.mcgill.ca/science/research/ours/sura.
- Complete **this form** (type) and sign. Give to your proposed supervisor. Apply through your supervisor's department.
- Please attach **transcripts**. Exceptionally for this competition, unofficial transcripts are sufficient.
- **Questions?** See contact information above.

Identification

Family name: _____ **Given name:** _____ **Title:** _____ *Optional. E.g.: Mr, Ms, ...*

McGill ID: _____ **Citizenship:** Canadian Permanent resident International student

Gender: F M *Optional. Preference may be given to female students for a limited number of SURAs.*

Contact information

Email: _____ @mail.mcgill.ca **Tel.:** _____

Street: _____ **Apt.:** _____

City, Province: _____ **Postal code:** _____

This address is: Permanent Temporary **If temp., moving date:** _____

Academic information

Program: _____ **Expected date of graduation:** _____

(E.g.: BSc Maj Chem Min Math. BA not eligible in 2015.)

(Year/Month)

Winter: U0 U1 U2 U3 **Winter:** Part-time Full-time Other

I have applied to NSERC USRA: Y N

Scholarships, other awards: (Most recent first. Indicate award name, start & end dates. Use additional sheet if necessary.)

Signatures

I acknowledge that the Faculty of Science may release my name, citizenship status, gender, and/or my project title to the donor or funding source, if necessary to comply with funding terms. If I am accepted for a SURA, I agree to provide thank you letters to the relevant donors, following Faculty of Science guidelines and timelines.

Student signature: _____ **Date:** _____