



Form for MSc thesis applicants: Confirmation of Supervision (and Funding, if applicable) from the Supervisor(s) and the Applicant.

Faculty of Dental Medicine and Oral Health Sciences, McGill University.

**** Note: Admission is subject to meeting university and faculty requirements and is not guaranteed. This form is a confirmation of supervision (and funding, if applicable) solely for consideration by the admissions committee.**

Please upload this form to the admissions platform.

There is no minimum stipend contribution from supervisors.

Applicant information (to be completed by the applicant)

- Name of applicant:
- Term of application: (e.g Fall 2023)
- Funding details:
a.) I have my own funding:

Source:

Student commits to maintaining satisfactory progress and will also apply for all external and internal funding competitions, where eligible.

Student signature:

Date:

b.) My proposed supervisor will fund. (Funding information to be completed by supervisor). If no funding is offered, kindly leave the funding rows blank and proceed to the signature.

- Proposed Supervisor name:
- Proposed Co-supervisor (if applicable):
- Amount per year:
- Fund number:

- Period of Grant:

Supervisor signature:

Date:

Co-supervisor signature

Date:

