



McGill

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SPEECH-LANGUAGE PATHOLOGY STUDENT BURSARY PROGRAM

2022-2023 ACADEMIC YEAR

FORM 2: REFERENCE 2

REFERENCES MUST BE SUBMITTED TO THE SCHOOL OF COMMUNICATION
SCIENCES AND DISORDERS BY NOVEMBER 7, 2022

NOTE: PLEASE DOWNLOAD THIS FORM, OPEN IT AND FILL IT OUT ON YOUR COMPUTER WITH ADOBE READER XI OR HIGHER. YOU CAN GET A FREE COPY OF ADOBE READER FROM THE [ADOBE WEBSITE](#). IT IS AVAILABLE FOR WINDOWS, MAC AND ANDROID DEVICES.

TITLE PAGE TO BE COMPLETED BY THE STUDENT
SECTIONS 2 TO 4 TO BE COMPLETED BY THE REFERENCE PROVIDER

APPLICATION SPONSORED BY:

McGill School of Communication Sciences and Disorders

FOR:

Name of Student

PROGRAM OF STUDY:

Name of Program

SUBMITTED ON:

(yyyy/mm/dd)

INSTRUCTIONS FOR STUDENT

INSTRUCTIONS FOR REFERENCE PROVIDER FOR THE STUDENT

Section 1: McGill SCSD Contact Information

Contact person: _____ E-mail address: _____

Tel. number: _____

Section 2: Information on Reference Provider (to be completed by the provider)

Name of reference provider: _____

Name of organization: _____ Title: _____

Mailing address: _____

Municipality: _____ Province: _____ Postal Code: _____

Cell. number: _____ Tel. number: _____ E-mail address: _____

**Section 3: Student Interest in Staying in the Province of Quebec to Practice
(to be completed by the provider)**

How long have you known the student? _____

Please describe your relationship to the student: (Maximum 30 words)

Please explain how this bursary will help the student's goal of practicing in Quebec as a Speech Language Pathologist
(Maximum 200 words)

Do you recommend this candidate for a bursary award?

YES without reservation

YES with reservation but I feel that the student should be given a chance, because:

Why is the student a good candidate for the SLP Student Bursary Program? (*Maximum 200 words*)

Section 4: Declaration by the Reference Provider

I declare that:

The information that I have provided in this form is accurate and complete.

Name

Signature

Date (yyyy/mm/dd)

The reference provider has an option to sign the form electronically, save the form and send it by email to the contact person at the McGill School of Communications Sciences and Disorders identified in Section 1 of this form.

The reference provider can also print the form, sign it, scan it and send it by email to the contact person at the McGill School of Communications Sciences and Disorders.