



STUDENT SUPPORT MEASURES 2022-2023 ACADEMIC YEAR

FORM 1 – STUDENT APPLICATION

BEFORE FILLING OUT THIS APPLICATION READ [THE GUIDE](#)

APPLICATION SPONSORED BY:

Name of Educational Institution

FOR:

Name of Student

PROGRAM OF STUDY:

Name of Program

SUBMITTED ON:

(yyyy/mm/dd)

STUDENT SUPPORT APPLICATION

The student must submit this signed and dated form and supporting documents to the contact Field Placement Coordinator at the educational institution.

Section 1: Student Information

Last name: _____ First name: _____

Sex: Male Female Prefer not to say Gender: Man Woman Other Prefer not to say

Section 2: Contact Information

Student's Address during Academic Year

Mailing address: _____

Municipality: _____ Province: _____ Postal Code: _____

Student's Permanent Address

Mailing address: _____

Municipality: _____ Province: _____ Postal Code: _____

Telephone 1: _____ Telephone 2: _____ Email 1: _____

What is the best way to contact you? Telephone 1 Telephone 2 Email 2:

Email 1

Email 2

Section 3: Citizenship

Status of your citizenship: Canadian Citizen Permanent Resident

Section 4: Program of Study

Program of study you are accepted into: _____ Level of study: _____

Section 5: Information on the Internship

Organization hosting the internship: _____

Address: _____ Region: _____

Internship Start Date: _____ End Date: _____

(yyyy/mm/dd)

(yyyy/mm/dd)

Section 6: Reasons for Choosing this Region for an Internship *(Maximum 150 words)*

Section 7: Career Long-Term Objectives *(Maximum 150 words)*

Section 8: Checklist Supporting Document

Most recent curriculum vitae

Section 9: Budget

A. Estimate the **transportation cost for each round trip** from your place of residence to the internship region. Attach an extra sheet, if necessary

VEHICLE

From	To	Distance (KM)	Rate/KM	Amount
			x	
			x	
			x	
			x	
			SUB-TOTAL:	

BUS **TRAIN** **PLANE**

From	To	Amount
		SUB-TOTAL:
TOTAL estimate of the transportation cost for the round trip from your place of residence to the internship region		

B. Estimate the transportation cost within the region where the internship is taking place. Attach an extra sheet, if necessary. *Students are encouraged to use public transport when available in their region.*

VEHICLE

From	To	Distance (KM)	Rate/KM	Amount
			x	
			x	
			x	
			x	
Cost of rental vehicle, if you had to rent a vehicle specifically for the internship				
Other forms of transport within the region where the internship is taking place (specify)				
TOTAL estimate of the transportation cost within the region where the internship is taking place				

C. Estimate the cost of accommodation in the region where the internship takes place (including rent and other related expenses). *Students are encouraged to find affordable lodging in their region.*

Cost of Accommodation	Amount
Cost of Rent	
Electricity and Heating	
*Other Costs (<i>please specify in the box below</i>)	
TOTAL estimate of cost of accommodation	

*If Applicable, please provide an attachment with details of your accommodation (e.g., proof of apartment rental)

D. Total amount of financial support requested for this internship

Cost Summary	Planned Amount
A. Total transportation cost for the round trip from the student's place of residence to the internship region.	
B. Total transportation cost within the region where the internship is taking place	
C. Total accommodation cost within the region where the internship takes place. (including rent, heating, electricity, etc.)	
Other related costs (telephone, internet, additional data plan, etc.) Specify:	
TOTAL:	

Section 10: English and French Proficiency

Please rate your language skills in English and French using the drop down options

	To understand	To speak	To read	To write
English				
French				

Are you currently enrolled in a French language course? Yes No

If yes, please describe the course(s) and what activities you are doing to improve your language skills. (*maximum 100 words*)

Section 11: Student Declaration

I, the undersigned, do hereby consent that the information contained in the application be transmitted to Dialogue McGill for evaluating this present application.

I declare that:

- The information that I have provided in this application is accurate and complete.
- The information in the supporting documents submitted is accurate and complete.
- I will advise the education institution of any change in my contact information.
- I declare my interest in returning to the internship region to work after my graduation.
- I will advise the education institution's Field Placement Coordinator of my first employment after graduation.
- If awarded funding for internship, I grant the Education Institution and Dialogue McGill to disseminate for promotional purposes, my photographic image, curriculum vitae and information about the funds awarded.
- I agree to allow my contact information to be entered into a database of health or social services professionals able to provide healthcare services in English that can be distributed to health or social services institutions.
- I agree, upon completion of studies, to participate in any formal follow-up monitoring or evaluation of the student support program conducted by Dialogue McGill and the Education Institution.
- I agree that Dialogue McGill will review typical rental amounts for my region when evaluating my budget. If my application is approved for funding and there is a difference between the actual cost and the approved amount, I will be responsible for covering the difference.

_____	_____	_____
Name	Signature	Date (yyyy/mm/dd)