



THE MASTERCARD FOUNDATION SCHOLARS PROGRAM AT MCGILL UNIVERSITY

Nomination Form for the 2021-22 Academic Year

PLEASE NOTE: This application is for MASTER's (non-thesis) applicants only.

SECTION 1: STUDENT INFORMATION

Family/Last Name First/Given Name Middle Name (if applicable)

Date of Birth (DD/MM/YYYY) Email Address

McGill ID Number (if applicable) uApply Username

Please list the program at McGill to which you are applying:

SECTION 2: NOMINATOR INFORMATION

Family/Last Name First/Given Name Middle Name (if applicable)

Title Department

Phone Number Ext. Email Address (professional)

Are you a: Faculty Member Administrative Staff Member Other: _____

How do you know the applicant? _____

How long have you known the applicant? _____

I, _____ (Nominator) hereby nominate _____ (student applicant) for the Mastercard Foundation Scholars Program at McGill University. I certify that this student meets the Eligibility Criteria for this scholarship and **fulfills the minimum requirements to be considered for admission to the university.**

Signature

Date (MM/DD/YYYY)