



## Confirmation of Supervision Form

### Instructions for the applicant:

Please fill out Part 1 of this form and have your proposed supervisor complete Part 2.

### Instructions for the supervisor:

Please fill out Part 2 of this form and return it to the applicant for inclusion in the application package. If the applicant does not already have a scholarship, commitment of salary support from the instructor **is a prerequisite for admission.**

Please see the most up-to-date stipend amounts at the following link:

<https://www.mcgill.ca/psychiatry/education/graduate-program/minimum-funding/minimum-stipend-september-2024>

Commitment of project support (for the applicant's thesis work) **is a prerequisite for admission. Funding source, duration and amount must be clearly indicated.**

### **Part 1 (to be completed by the applicant)**

Name of applicant (please print): \_\_\_\_\_

Name of proposed supervisor (please print): \_\_\_\_\_

Proposed date of entry (Semester, Year): \_\_\_\_\_

### **Please check the line that applies to your case:**

I have my own studentship from the following agency: (e.g., CIHR, NSERC, SSHRC, etc.):

\_\_\_\_\_

My proposed supervisor has agreed to support me as per information provided in Part 2.

**Applicant's Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_



**Part 2 (to be completed by the supervisor)**

\_\_\_ I agree to act as the applicant's supervisor.

**Confirmation of salary support (please check the line that applies):**

\_\_\_ I agree to provide a stipend to the applicant for the amount of \_\_\_\_\_ per annum.

This amount will be paid from a grant from the following agency \_\_\_\_\_

and terminates on the following date (month/ year) \_\_\_\_\_.

**Confirmation of project support**

Estimated amount needed to support the applicant's project (per annum): \_\_\_\_\_

**(Note:** If no financial support is required for the applicant's project, please include a brief note indicating why).

This amount will be covered by a grant from the following agency \_\_\_\_\_, in the

amount of \_\_\_\_\_ per annum, and terminates on the following date

(month, year) \_\_\_\_\_.

I have read and approved the applicant's research project proposal.

**Supervisor's name** (please print): \_\_\_\_\_

**Date:** \_\_\_\_\_

**Supervisor's signature:** \_\_\_\_\_