

Application Form – *Undergraduate Summer Studentships*

Deadline for Submission: February 16, 2018

Applicant Information:												
Name					Institution							
Research Project Titl	е											
Address					E-mail							
City Province				Postal Code			Phone (Home)			e)	Phone (Cell)	
Stu				ar of udy rent)	Start Date dd/mm/year			Eı	End Date dd/mm/year			GPA
If you are graduating, where and in what program will you be enrolled in fall 2018?												
Supervis	or Informa	tion:										
AllerGen Ir	nvestigator's	Name		Em	Email			Telephon			Telephor	ne
Institution Pr				Pro	Program (Faculty/Department)							
Address				City	City			Province			vince	Postal Code
The project description included in this application was written by whom? Please indicate which most applies:												
Student	Superviso	or Coi	mbinat	ion Other (please specify)								
Is this project part of a larger research project? YES NO If YES, explain the relationship.												
Explain th	e relations	nip.										



Describe your role in the research project. (Maximum 200 words)
Describe how this project complements your long-term career goals. (Maximum 200 words)
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Describe the training environment to be provided by the supervisor and host institution. (Maximum 200 words)					
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Conflicts of Interest Disclosure					
Applicants must declare any real, perceived, or potential Conflicts of Interest between the applicant, and his/her supervisor and/or referees. For more information on Conflicts of Interest, please see the AllerGen NCE Inc. Conflict of Interest Policy: http://allergen-nce.ca/wp-content/uploads/ADM-					
01Conflict-of-Interest-PolicyApproved-16-Feb-2017.pdf					
I declare the following Conflicts of Interest:					
I have no Conflicts of Interest to declare.					
Signatures:					
Applicant:		Date:			
дрисант.		Date.			



Application Submission:

Completed applications must be sent electronically in a <u>consolidated PDF</u> to Leah Graystone at <u>leahgraystone@allergen-nce.ca</u> no later than February 16, 2018.

Transcripts and letters of support/reference may be emailed directly to Leah Graystone at leahgraystone@allergen-nce.ca

Notification will be provided no later than March 30, 2018.

Application Checklist:	
Application form Project proposal Applicant's CV Supervisor's CV Official Transcripts (all years of undergraduate study) Supervisor(s) Letter(s) of support	Applications will be reviewed by AllerGen Administrative Centre for completeness and for conformance to all eligibility requirements. Incomplete applications will be returned to the applicant without further consideration.
Two professional/academic reference letters	

Please carefully read all instructions and include all necessary documents. Incomplete applications will not be reviewed. It is the student's responsibility to ensure that the materials have been successfully submitted.

For more information contact:

Leah Graystone HQP and Events Coordinator (905) 525-9140 ext. 26633 leahgraystone@allergen-nce.ca

Signatures:	
Applicant:	Date:
AllerGen Investigator/Supervisor:	Date:

For Internal Use Only:			
Date Received: Application		Complete:	Notes:
	Yes	No	