

Application Form – Undergraduate Summer Studentships

Deadline for Submission: February 10, 2017

Applicant Information:					
Name			Institution		
Research Project Title					
Address			E-mail		
City	Province	Postal Code	Phone (Home)	Phone (Cell)	
Degree Program/Discipline		Year of Study (current)	Start Date <small>dd/mm/year</small>	End Date <small>dd/mm/year</small>	GPA
If you are graduating, where and in what program will you be enrolled in fall 2016?					
Supervisor Information:					
AllerGen Investigator's Name		Email		Telephone	
Institution		Program (Faculty/Department)			
Address		City		Province	Postal Code
The project description included in this application was written by whom? Please indicate which most applies:					
Student	Supervisor	Combination	Other (please specify)		
Is this project part of a larger research project?			YES	NO	If YES, explain the relationship.
Explain the relationship.					

Describe your role in the research project. (Maximum 200 words)

Describe how this project complements your long-term career goals? (Maximum 200 words)

Describe the training environment to be provided by the supervisor and host institution.
(Maximum 200 words)

Application Submission:

Completed applications must be sent electronically in a single PDF to Michelle Harkness at michelleharkness@allergen-nce.ca no later than February 10, 2017.

Transcripts and letters of support/reference may be emailed directly to Michelle Harkness at michelleharkness@allergen-nce.ca.

Notification will be provided no later than March 31, 2017.

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
- Two professional/academic reference letters

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.

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:

Michelle Harkness
 Manger HQP Training Program and Events
 (905) 525-9140 ext. 26633
michelleharkness@allergen-nce.ca

Signatures:

Applicant		Date
AllerGen Investigator		Date

For Internal Use Only:

Date Received:	Application Complete: Yes No	Notes:
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