



APPLICATION FORM - 2018

Faculty of Science Undergraduate Summer Research Awards

NSERC USRA

JOY M CUNNINGHAM - FAYE SOBEY - WARR - LAING - WITHERSPOON

Imhotep's Legacy Academy - Faculty of Science

Student information

Student name _____ BANNER number _____

E-mail _____ Phone number _____

Major: _____ Years of study completed _____

*Canadian citizen/permanent resident: _____

Please check any that apply: _____ Intend to graduate in May**

_____ Born in Nova Scotia

_____ Aboriginal

_____ African descent

_____ Enrolled in the College of Sustainability

Provide academic transcripts from all universities attended (Dal BANNER printouts are acceptable)

* International students are welcome to apply, but are not eligible for USRA (NSERC) awards

** Complete Appendix A in addition to this form if you plan to graduate this May

Potential Supervisor information

Please complete the following if you are willing to have the above student work under your supervision this summer should they receive a summer research award. Minimum required supervisor contribution is \$2500.

Supervisor name: _____ Department _____

1. Context in which you know the student: _____

Low High Unknown

2. Level of student motivation/commitment: _____

3. Research ability/potential of student: _____

4. Title of proposed summer project: _____

5. NSERC funding Yes No NSERC grant type _____

SSHRC Insight funding Yes No

CIHR funding Yes No

Other research funding (specify) _____

COMPLETED FORM AND TRANSCRIPTS GO TO YOUR DEPARTMENTAL COORDINATOR

APPENDIX A**Faculty of Science Undergraduate Summer Research Awards****Complete the following if you plan to graduate this May**

Graduating students are eligible to compete for undergraduate summer research awards if they are planning to begin a thesis-based graduate program in fall.

Student name _____

Have you held a summer research award in previous summer(s)? _____

If so, in whose lab(s) did you work? _____

* Note: students may hold awards in the same lab for a maximum of 2 summers

Describe your plans for graduate school next year

School(s)/department _____

Supervisor name _____

Application status _____

Additional information (attach letter if you like) _____

Potential Supervisor name _____

	Low				High	Unknown
1. Likelihood of student pursuing a research career	___	___	___	___	___	___
2. Overall research ability/potential of student	___	___	___	___	___	___

Comments (send letter to departmental coordinator)

Please comment briefly on the above rankings. Explain how this summer's research will benefit the student (e.g., student will expand on or publish honours research). Indicate where (school, department) the student plans to begin graduate studies.

Completed form and supervisor letter go to departmental coordinator.