CGSM Workshop
Graduate Science Education

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Elise Granton, Student Lead
Barsha Rimal, Scholarship and Stipend Officer

Nov 6, 2020
Housekeeping

- Please remain muted with video off unless you would like to ask a question.
- There will be breaks throughout the workshop for questions. You can use the chat or turn your video and mic.
- This session will be recorded and posted on the GSE website. Slides will be emailed to all registrants.
Agenda

• Background, Eligibility and Timelines
• Adjudication Criteria
• Application parts
  • Application form
  • Common CV
  • Research Proposal
  • Letters of Reference
• General Tips
• Resources
Canada Graduate Scholarship-Masters (CGSM)

• Three agencies (Tri-council)
• CIHR: Health Research
• NSERC: Natural Sciences and Engineering
  • Does not fund human health research
• SSHRC: Social Sciences and Humanities
• $17,500/year, 1 year, non-renewable
• Uncertain about which agency to apply to? Ask here
  • CIHR cgsma@cihr-irsc.gc.ca
  • NSERC schol@nserc-crsng.gc.ca
  • SSHRC fellowships@sshrc-crsh.gc.ca
CGSM Harmonization

• All applicants go through online portal managed by NSERC
  • Research Portal
• Common application for all 3 agencies
• Applications are adjudicated at FGS not nationally
• Universities have a quota of awards
  • CIHR: 23
  • NSERC: 34
  • SSHRC: 34
Eligibility

• Canadian or PR
• Have completed as of Dec 31, 2020
  • Between 0-12 mo full time study
    • M.Sc. Program
    • Doctoral program entering without having a M.Sc. (Direct entry)
    • Not having held a CGSM
    • First class average (3.5 GPA at U of C) in last 2 years of study (full time equivalents)
  • Can only submit 1 application per year to either CIHR, NSERC or SSHRC
• Significant research component
  • Clinical oriented, joint programs with professional degree if there is significant research
  • Course based usually not eligible
Eligibility

• Eligibility can be tricky.
• Contact FGS Graduate Scholarship Officers with questions—they are the pros!
• CIHR, SSHRC
  • Elsa-Lee Alho (elsalee.alho@ucalgary.ca)
• NSERC
  • Erin Coburn (ecoburn@ucalgary.ca)
• General questions
  • gsaward@ucalgary.ca
Timelines

CGS Masters Deadline:
Tuesday, December 1, 2020
6:00 PM MT/8:00 PM ET

Pay attention to countdown!

Contact REFEREES ASAP
When are results out?

• By April 1, 2021 on Research Portal
• Universities will send out results on same day via email
  • Successful, Unsuccessful, Waiting List
• Students can apply to up to 3 institutions, so there is a tumble down of offers if awards are declined
Questions??
The application

- Application in Research Portal
- Summary of the proposal (Lay Abstract)
- Research proposal (1 page)
  - Bibliography/Citations (1 page)
- CGSM Canadian Common CV
  - Completed on CCV site, and attached to application in Research Portal
- Two referee assessments
- Transcripts
  - Uploaded to Research Portal
Adjudication Criteria

• 50% Academic Excellence
  • Transcripts
  • Awards
  • Reference assessments (x2)

• 30% Research Potential
  • Research proposal
  • Common CV
  • Reference assessments (x2)

• 20% Personal Characteristics and Interpersonal Skills
  • Common CV
  • Reference assessments (x2)
Top Reasons Good Students Don’t Get Funded

• Not applying.
• A generic reference--the assessment is positive but gives no specifics and does not address criteria
• Content, context and/or impact of research not clearly stated. “So what?”
• Not following instructions by stretching the rules
• Frustrating evaluators by making material hard to find
• Diluting genuinely important/impressive material by describing generic material at length
• Not addressing possible weaknesses in the application
Application portal

- What you will see when you log in
- Timer
- Application info
  - Identification
  - Activity Details
- Proposal summary
If field of research is "Health" you will need a CIHR PIN

- Natural Sciences
- Social Sciences other options

- Register with CIHR here: http://www.cihr-irsc.gc.ca/e/38201.html

- Start early, it can take 1 full working day to get CIHR PIN
Activity Details

• Sex and Gender portion important
• If yes, it will open window for explanation
  • Basic science: Sex of animals, cell lines.
  • Patient oriented: sex and gender considerations
• Talk to your supervisor!!
Common CV

- Register for Common CV (CCV) on site.
  - Do this ASAP if you haven’t done so already
- Select the CGSM CCV from Funding dropdown menu
- Enter information about
  - Publications and Presentations
  - Awards
  - Extracurriculars/leadership activities
  - Leaves of absence and impact on research
- Keep criteria from each section in mind (Academics, Research Potential, Personal Characteristics).
- Demonstrate that you are well-rounded.
Summary of Proposal and Attachments

- Summary of Proposal
  - Separate Page
- Research proposal and citations
- Transcripts as a single file
- Common CV
- Invite your referees
COVID and Research

• Well understood that shutdowns due to COVID have impacted progress (academic and research)
• Can use “Leaves of Absence and Impact on Research” in CCV to detail specific impacts on work due to COVID
  • Cancellation of field work due to travel restrictions
  • Inability to do person-person work
  • Inability to get training
Questions???
Adjudication Criteria

- 50% Academic Excellence
  - Transcripts
  - Awards
  - Reference assessments (x2)
- 30% Research Potential
  - Research proposal
  - Common CV
  - Reference assessments (x2)
- 20% Personal Characteristics and Interpersonal Skills
  - Common CV
  - Reference assessments (x2)
Academic Excellence

• As demonstrated by past academic results, transcripts, awards and distinctions:
  • Academic record (first class average)
    • Transcripts
  • Scholarships and awards held
    • Application form, CCV (Awards), reference assessments
  • Type of program and courses pursued
  • Course load
  • Relative standing (if available)

• Since this is worth 50%, do everything you can to make sure you address all of the selection criteria:
  • Reference assessments
  • Address potential weaknesses head-on
Research Potential- 30%

• How are these sections scored? Develop sub-sections accordingly.
  • Refereed Contributions:
  • Peer-Reviewed Publications, Conference Presentations, Invited Talks.
    • Include local talks too (i.e LIM symposium) as well as international ones.
    • State your role in each.
      • Ex. Conducted in vitro experiments for X publication.
  • Scholarly Achievements:
    • List chronologically contributions under each sub-section.
      • Helps capitalize on white space versus paragraph form.
Research proposal

• Quality of your proposal
  • Specific, focused, feasible and clearly stated research questions/objectives/hypothesis
  • Methodology explained clearly
  • Significance and expected contributions to research

• Think about
  • What is new and important about your work?
  • What is the key question and how will you address it?
  • How does your work fit into the bigger picture?
  • What does success look like for your project?

• Hook your reader early
  • Introduction at ”newspaper” level—more general
  • State importance of work quickly
The Proposal

• How is the proposal scored? Develop sub-sections accordingly.
• Project ideas should be concise and easily understood.
  • Rationale
  • Aims to address questions
• Spacing = visually appealing
• Ask people outside your lab to review your proposal for clarity, brevity, and comprehension - overall, the more eyes, the better.
Personal Characteristics and Interpersonal Skills (20%)

• Work experience
  • CCV

• Leadership experience
  • CCV, reference assessments

• Project management including organizing conferences and meetings
  • CCV, reference assessments

• The ability or potential to communicate theoretical, technical, and/or scientific concepts clearly in written and oral formats
  • Research proposal, references, awards, CCV

• Involvement in academic life
  • references, CCV

• Volunteerism/community outreach
  • references, CCV
• Use minimalism to achieve clarity.
  • Remove filler words.
    • Ex. Immunocompromised patients that contract pneumonia often can develop very severe symptoms and illness.
      • Change to:
        • Immunocompromised patients contract pneumonia and develop severe sickness.

• Have a consistent theme and overall message.
  • Ex. Refer to impact in intro then use it in the conclusion.

• Limit each paragraph to a single message.
  • Question → Aim → What/how/why → conclude.
References

• **Ask early:** Give your referees time to write a good assessment.

• **Choose wisely:** ask your potential referees if they can provide you with a positive, strong reference; one of them should be your current supervisor or someone who is familiar with your academic work. Tri-councils are research awards, so it is best to have researchers write your assessments.

• **Follow up - Don’t be shy!**
  • Remind your referees of the deadline a week or more before the reference is due.
Reference Assessment

Do not just ask someone for a reference. Be proactive and make it easy for your referee to write a good assessment:

- Provide the selection criteria.
- Provide transcripts and a CV: highlight areas you wish to have covered in the assessment.
- Meet to discuss: what criteria do you think they should address? Provide examples.
- Inform them of the deadline & REMIND them.
Reference Assessments: Tips for Referees

Strong assessments:

• Address the criteria in each sub-field.

• Describe characteristics and abilities. Use extracurricular activities, and describe roles (any leadership roles), address personality traits and comment on where you think this student will end up in their career.

• **Be specific.** Back a point up with an anecdote.
Letters of Reference,  
The Student Perspective

• Carefully choose/suggest terminology
  • Do your research on a ‘successful applicant’.

• How are these letters scored?
• Total points for each section should correlate approximately with number of examples your referees provide.
  • Introduction – few sentences; describe your relationship capacity and context
  • Research Ability* – Critical Thinking, Independence, Organizational Skills, Originality, Perseverance, Interest in Discovery
  • Leadership Ability – single paragraph

• Give your referee some guidance.
  • List attributes, key words, examples etc.
  • Length and depth in each section.
Questions??
Putting It All Together, Tips for Scientific Writing

• Keep sentences short and precise.
  • Don’t overuse transition words.

• Only use an adjective if it is relevant.
  • Don’t say the same thing in three different ways in any single section.

• Don’t slow the reviewer down.
  • Avoid jargon, buzzwords, or overly technical language. Don’t use acronyms.
Putting It All Together, Tips for Scientific Writing

- Spoken language and common sense are generally better guides than a rule book.
  - It is more important to be understood than it is to form a grammatically perfect sentence.

- Commas denote a pause in speaking.
  - Speak the sentence aloud to find pauses. Make it natural.

- Choose concrete language and examples.

- Avoid placing equations in the middle of sentences.
Formatting: Aesthetics

• Don’t cram as much text as possible into the document
• Consider using some of the following:
  • Space between paragraphs
  • Indentation
  • Headings
  • Bullets
  • Bold text

Image copyright Ally Brosh
http://hyperboleandahalf.blogspot.ca/
Aplastic Anemia (AA) is a bone marrow failure disease where in approximately 20% of patients, the AA evolves into a myelodysplastic syndrome (MDS) or acute myeloid leukemia (AML), clonal disorders of hematopoietic cells. Studies have shown there is an association between shortened telomeres, advanced AA and increased risk of progression to MDS and AML. However, the mechanism on how shortened telomeres impact disease progression and response to treatment is not well understood. Progressive telomere shortening triggers cellular senescence but in a small proportion of cells, this is bypassed by activating the enzyme telomerase. Preservation of telomere length requires the activation of the telomerase complex, consisting of telomerase reverse transcriptase (hTERT) and an intrinsic RNA template (hTR). In the case of AA, telomerase activation and shortened telomeres may lead to an accumulation of chromosomal aberrations, evading senescence and apoptosis, providing a proliferative advantage of leukemic clones. Heterozygous mutations in the gene encoding the telomerase protein component hTERT are seen in approximately 10-15% of AA patients and result in short telomeres. We will investigate how mutations lead to telomere shortening and telomere dysfunction in cells in order to improve our understanding of the role telomerase plays in the pathogenesis of these disorders. Hypothesis: Aberrant telomerase activity from naturally occurring hTERT mutations in AA and AML, results in telomere shortening and genomic instability, contributing to bone marrow failure and disease progression. We will test this under the following aims: Aim 1. Biochemical characterization of hTERT mutants associated with AA and AML. Telomerase regulates telomere length at several levels. First, hTERT and hTR are transcribed, processed, and in the case of hTERT, translated. Second, telomerase localizes in the nucleus and assembles into an active complex. Third, the enzyme recognizes and is recruited to the telomere. Telomerase then catalyzes de novo addition of the telomeric sequence. Since each of these steps is indisputable, disruption of any one would decrease the efficiency of telomerase function. To understand the biochemical properties of these naturally occurring mutants, we have generated expression constructs bearing hTERT mutations found in patients with AA and AML and will test each biochemical activity in vitro. Catalytic activity will be measured using the telomeric repeat amplification protocol (TRAP), processivity measured using the conventional telomerase assay and the ability to interact with telomeric DNA measured with a primer binding assay. Aim 2. Generation of cell lines as surrogate models of human disease state. To better understand the effect of hTERT mutations in a cell culture model, we will utilize various cell models to create human cell lines that over-express the naturally occurring hTERT proteins. 2a. Hematological Cell Line: For initial characterization, we will stably express our mutants in a leukemic cell line, THP-1. 2b. Senescent Cell Line: We will also examine the effects of expressing our mutant hTERT proteins in a fibroblast cell line, a telomerase negative cell line. These cells do not express telomerase and telomeres shorten with each division. This allows us to address whether expression of hTERT mutants are able to elongate telomeres and bypass senescence. 2c. Hematological Stem Cells: To address the function of mutant telomerase in hematopoiesis we will utilize a long term culture method using CD34+ hematopoietic stem cells. CD34+ cells will be collected from apheresis bone marrow transplant products and transfected with either a control vector or specific hTERT variants. In all 3 models, we will examine the effects of mutant hTERT on telomerase activity (TRAP assay), telomere length (Terminal Restriction fragment analysis), senescence (growth curves and β-galactosidase activity), chromosomal instability (cytogenetics and telomere induced foci assays), apoptosis (Annexin V staining) and the DNA damage response (DDR, clonogenic survival assays, and activation of the DDR via phosphorylation of ATM, Chk2, and p53) Aim 3. Affect of therapies on mutant telomerase. In addition to examining the contribution of hTERT mutations on disease progression, our cell model systems can be used to assess therapeutic responses. Each of our stable cell lines expressing either wt or mutant hTERT proteins will be treated with a selective chemotherapeutic panel from MDS and AML treatment protocols to determine how expression of mutant telomerase and difference in telomere lengths affect the viability of the cells via alamar blue viability assay. Outcomes such as cellular differentiation, telomerase activity and apoptosis will also be measured. By considering the role telomeres, telomerase and genomic stability play in the hematopoietic system, we can determine the replicative capacity of hematopoietic stem cells during tumour progression. This will provide insight in predicting response to therapeutic, determining most suitable treatment plan and a mechanism to monitor disease progression. Our studies will advance our understanding of bone marrow failure and AML disease progression in patients with hTERT mutations as well as lead to novel therapeutics for bone marrow failure syndromes.
Aplastic Anemia (AA) is a bone marrow failure disease where in approximately 20% of patients, the AA evolves into a myelodysplastic syndrome (MDS) or acute myeloid leukemia (AML), clonal disorders of hematopoietic cells. Studies have shown there is an association between shortened telomeres, advanced AA and increased risk of progression to MDS and AML. However, the mechanism on how shortened telomeres impact disease progression and response to treatment is not well understood. Progressive telomere shortening triggers cellular senescence but in a small proportion of cells, this is bypassed by activation of the enzyme telomerase. Preservation of telomere length requires the activation of the telomerase complex, consisting of telomerase reverse transcriptase (hTERT) and an intrinsic RNA template (hTR). In the case of AA, telomerase activation and shortened telomeres may lead to an accumulation of chromosomal aberrations, evading senescence and apoptosis, providing a proliferative advantage of leukemic clones. Heterozygous mutations in the gene encoding the telomerase protein component hTERT are seen in approximately 10-15% of AA patients and result in short telomeres. We will investigate how mutations lead to telomere shortening and telomere dysfunction in cells in order to improve our understanding of the role telomerase plays in the pathogenesis of these disorders. Hypothesis: Aberrant telomerase activity from naturally occurring hTERT mutations occurring in AA and AML, results in telomere shortening and genomic instability, contributing to bone marrow failure and disease progression. This will be tested via the following:

Aim 1. Biochemical characterization of hTERT mutants associated with AA and AML. Telomerase regulates telomere length at several levels. First, hTERT and hTR are transcribed, processed, and in the case of hTERT, translated. Second, telomerase localizes in the nucleus and assembles into an active complex. Third, the enzyme recognizes and is recruited to the telomere. Telomerase then catalyzes de novo addition of the telomeric sequence. Since each of these steps is indispensable, disruption of any one would decrease the efficiency of telomerase function. To understand the biochemical properties of these naturally occurring mutants, we have generated expression constructs bearing hTERT mutations found in patients with AA and AML and will test each biochemical activity in vitro. Catalytic activity will be measured using the telomeric repeat amplification protocol (TRAP), processivity measured using the conventional telomerase assay and the ability to interact with telomeric DNA measured with a primer binding assay.

Aim 2. Generation of cell lines as surrogate models of human disease state. To better understand the effect of hTERT mutations in a cell culture model, we will utilize various cell models to create human cell lines that over-express the naturally occurring hTERT proteins. 2a. Hematological Cell Line: For initial characterization, we will stably express our mutants in a leukemic cell line, THP-1. 2b. Senescent Cell Line: We will also examine the effects of expressing our mutant hTERT proteins in BJ fibroblast cell, a telomerase negative cell line. These cells do not express telomerase and telomeres shorten with each division. This allows us to address whether telomerase expression of hTERT mutants are able to elongate telomeres and bypass senescence. 2c. Hematological Stem Cells: To address the function of mutant telomerase in hematopoiesis we will utilize a long term culture method using CD34+ hematopoietic stem cells. CD34+ cells will be collected from apheresis bone marrow transplant products and transfected with either a control vector or specific hTERT variants. In all 3 models, we will examine the effects of mutant hTERT on telomerase activity (TRAP assay), telomere length (Terminal Restriction Fragment analysis), senescence (growth curves and B-galactosidase activity), chromosomal instability (cytogenetics and telomere induced foci assays), apoptosis (Annexin V staining) and the DNA damage response (DDR, clonogenic survival assays, and activation of the DDR via phosphorylation of ATM, Chk2, and p53).

Aim 3. Affect of therapeutics on mutant telomerase. In addition to examining the contribution of hTERT mutations on disease progression, our cell model systems can be used to assess therapeutic responses. Each of our stable cell lines expressing either wild or mutant hTERT proteins will be treated with a selective chemotherapeutic panel from MDS and AML treatment protocols to determine how expression of mutant telomerase and difference in telomere length affects the viability of the cells via alamar blue viability assay. Outcomes such as cellular differentiation, telomerase activity and apoptosis will also be measured. By considering the role telomeres, telomerase and genomic stability play in the hematopoietic system, we can determine the replicative capacity of hematopoietic stem cells during tumour progression. This will provide insight in predicting response to therapeutics, determining most suitable treatment plan and a mechanism to monitor disease progression. Our studies will advance our understanding of bone marrow failure and AML disease progression in patients with hTERT mutations as well as lead to novel therapeutics for bone marrow failure syndromes.
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Aim 1. Biochemical characterization of hTERT mutants associated with AA and AML.
Aim 2. Generation of cell lines as surrogate models of human disease state.
Aim 3. Affect of therapeutics on mutant telomerase.

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In addition to examining the contribution of hTERT mutations on disease progression, our cell model systems can be used to assess therapeutic responses (Aim 3). Each of our stable cell lines expressing either wt or mutant hTERT proteins will be treated with a selective chemotherapeutic panel from MDS and AML treatment protocols to determine how expression of mutant telomerase and difference in telomere length affects the viability of the cells via alamar blue viability assay. Outcomes such as cellular differentiation, telomerase activity and apoptosis will be also be measured. By considering the role telomeres, telomerase and genomic stability play in the hematopoietic system, we can determine the replicative capacity of hematopoietic stem cells during tumour progression. This will provide insight in predicting response to therapeutics, determining most suitable treatment plan and a mechanism to monitor disease progression. Our studies will advance our understanding of bone marrow failure and AML disease progression in patients with hTERT mutations as well as lead to novel therapeutics for bone marrow failure syndromes.
Putting It All Together, A Final Word

Take breaks

Read out loud

Ask for input and edits
Questions??
Application support
Peer Mentoring Process

- 10-12 peer mentors each from masters and doctoral awards.

- Signup sheet with mentors availability will be posted.
  - Those who would like to meet with them can indicate their name beside the mentors.
  - Mentor emails will be provided so you can reach out on your own time to them.
  - Specific awards of mentors won’t be shown but whether they received a masters or doctoral award will be indicated.
Peer Mentoring Process: Example

<table>
<thead>
<tr>
<th>Mentor name</th>
<th>Mentee name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elise Granton</td>
<td>Someone</td>
</tr>
<tr>
<td><a href="mailto:elise.granton@ucalgary.ca">elise.granton@ucalgary.ca</a></td>
<td><a href="mailto:Someone@ucalgary.ca">Someone@ucalgary.ca</a></td>
</tr>
<tr>
<td>Doctoral</td>
<td></td>
</tr>
</tbody>
</table>
Internal review by CSM postdocs

• Students writing Tri-council doctoral scholarships matched with postdoc reviewers
• Contact me at rdevinne@ucalgary.ca for link
• Or click here CGSM Application Support to access form for both postdoc review and peer mentors.
Scholarship and Stipend Officer

• Barsha Rimal
  • Email(s): awardsgse@ucalgary.ca; gseproj@ucalgary.ca

• Scholarship Support
  • Advertise major scholarship and award programs to CSM graduate students and supervisors
  • Administer a subset of GSE scholarship programs
  • Assist CSM graduate students locate and apply for international, national, provincial, regional, and institutional scholarships and awards (e.g., interpret and navigate application guidelines and processes)

• Stipend Support
  • Set up, revise, terminate all CSM graduate student stipend payments
FGS resources

- Plan your **support network**: your supervisor, your program (is there a department workshop?)
- Consult current scholarship holders in your program
- **Peer review**: Scholarship Cafés & Drop-In Mentoring (Zoom)
- [gradlead@ucalgary.ca](mailto:gradlead@ucalgary.ca)

<table>
<thead>
<tr>
<th>Scholarship Café #1</th>
<th>Tuesday, November 17, 2020</th>
<th>9:00am - 11:30am</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scholarship Café #2</td>
<td>Tuesday, November 24, 2020</td>
<td>1:00pm - 3:30pm</td>
</tr>
<tr>
<td>Drop-in #1</td>
<td>Thursday, November 26, 2020</td>
<td>3:00pm - 4:00pm</td>
</tr>
<tr>
<td>Drop-in #2</td>
<td>Friday, November 27, 2020</td>
<td>9:00am - 10:00am</td>
</tr>
<tr>
<td>Drop-in #3</td>
<td>Monday, November 30, 2020</td>
<td>9:00am - 10:00am</td>
</tr>
</tbody>
</table>
Good luck on your application!!!