

#### **ELEANOR MACKIE DOCTORAL SCHOLARSHIP IN WOMEN'S HEALTH APPLICATION FORM**

DEADLINE: 4:30pm (MT) November 15, 2019				
APPLICANT INFORMATION				
Family Name:	First Name(s):			
UCID #:				
E-mail Address:	dress: Phone number:			
Citizenship Status (at time of registration) Select one:				
ACADEMIC INFORMATION				
Graduate Program in which you will be registered:				
Master's Thesis-based Master's Course-based Doctoral				
Registration status Select one:	Date you started program:			
<ol> <li>By submitting this application to the program, I declare that:</li> <li>I agree to having read and understood the instructions for the above selected award categories and that I meet the eligibility requirements as listed in the Graduate Awards Database.</li> <li>I have answered all questions applicable to me and that all information is true and complete.</li> <li>I will notify my program and the Graduate Scholarship Office if I withdraw from full-time status, receive other external, faculty or departmental scholarships/ bursaries/ awards or otherwise change my studentstatus.</li> <li>My program may request additional information pertaining specifically to my academic performance and enrolment status for the purpose of determining my eligibility for scholarships/bursaries.</li> <li>In applying for an award, pertinent information may be released to the donor of the award, provincial funding bodies, faculty offices, appropriate University of Calgary administrative offices.</li> <li>If I receive an award the amount may be disclosed to the Financial Services.</li> <li>If I receive an award, I will acknowledge the private donor(s) of the award with a personal letter of thanks and I understand that my contact information will be given to the donor.</li> <li>I understand the information provided on this application may be used for research and statistical analysis.</li> </ol>				
Applicant Name:  Signature:  Date:				
This information is collected under the authority of the Freedom of Information and Protection of Privacy Act, the Taxation Act (Canada) and the Statistics Act (Canada) to determine your eligibility for graduate scholarships, awards and bursaries. If you are or become a student at the University of Calgary, this information will form part of the student record. Please direct any questions about the use of this information to the				

FOIP Advisor, Faculty of Graduate Studies, University of Calgary, Calgary, Alberta, Canada T2N 1N4. Telephone: (403) 220-4938.

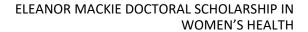


Referee #1:

## Referees, Academic History and Scholarship History

<b>REFERENCE LETTERS</b> If you are currently in an academic program, one of the referees must be your supervisor or someone
familiar with your current academic work. References for admission may be used toward the scholarship competition as long as
they have been written within the last twelve months prior to the competition deadline. Reference letters should be emailed to
<u>awardsgse@ucalgary.ca</u> by the <b>November 15, 2019 deadline</b> .

whether or not you received a degree from those in Ire assigned. Additional institutions may be attach						Month/Year
Academic Institution and Country		Degrees/Diplomas (Completed and in progress)		Month/Year Started		Awarded (or expected)
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warded.	Month/Year	Month/Year			Sou	ırce of Funds
Name of Scholarship or Award	Month/Year	Month/Year			Sou	





### **Research Proposal or Statement of Study**

Your <u>research proposal or statement of study</u> should demonstrate evidence of solid and wide knowledge of the discipline and your ability to communicate it to a non-specialist audience. Do not exceed this page.





Contributions			
Presentations, Performances, Exhibition	s described in the <u>categories</u>	<u>of publications</u> . Additional	pages
nay be attached. Check box if N/A			



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#### Contributions cont'd

<b>Publications:</b> Use consistent form is N/A ☐	natting as described in the <u>categories of publications</u> . Additional pages ma	y be attached. Check box