Dr. Forough Khadem Memorial Award

APPLICATION FORM - HSGSA - RFHS Graduate Studies

Applicant Name:			
College:			
Department (if applicable):			
Student Number:			
Email Address:			
Street Address:			
City, Province:			
Postal Code:			
Phone Number:			
Advisor Name:			
College:			
Department (if applicable):			
Co-Advisor Name (if applicable):			
College:			
Department (if applicable):			
Award Category:	Master's	PhD	
I have reviewed the Terms of	Reference for this award	d before preparing this application pack	age.
The following are assembled in order	in a single PDF file in thi	is order with file name "department/col	lege - applicant surname
Application Form (this docu	ment)¹.		
curriculum vitae;			
	ate's proposed or ongoin	g research (maximum 500 words);	
·		ce in our community (maximum of 500 v	words).
- and attached as a separate file:			
digital photo of the candida		presentation of award, should the cand lution $[0.5 - 1 MB]$ preferred);	lidate be selected as a
- and submitted separately:			
two letters of reference (at that supports their scientific		provided from a professor at a post-sec hip/initiative) from:	ondary institution
1) Referee Name:		Email address:	
2) Referee Name:		Email address:	
Applicant's Signature:		Advisor's Signature:	

¹This document needs to be printed as PDF (e.g. Microsoft Print to PDF) to preserve the signatures. After printing as PDF, you can combine all the files together.