



Internal use

J. A. Bombardier Canada Graduate Scholarships - Master's

Identification

Citizenship and Statistical and Administrative Information will be used by SSHRC for administrative and statistical purposes only. Filling out the Statistical and Administrative Information section is optional.

Name

Family name	Given Name	Initials	Title
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Full name used during previous contact with SSHRC, if different from above.

Citizenship - Applicants must indicate their citizenship status.

Status Canadian Permanent resident of Canada since Other (country)

(yyyymm/dd) / /

Statistical and Administrative Information

Birth year	Gender	Correspondence language	Language proficiency	Read	Write	Speak	Comprehend aurally
	<input type="radio"/> F <input type="radio"/> M	<input type="radio"/> English <input type="radio"/> French	English French	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Contact Information

The following information will help us contact you more rapidly. Secondary information will not be released by SSHRC without your consent.

Primary telephone number				Secondary telephone number			
Country code	Area code	Number	Extension	Country code	Area code	Number	Extension

Primary E-mail



Family name, Given name

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Current Mailing Address The address you provide must be complete and accurate because we will use it to correspond with you.			Permanent Canadian Address Regardless of your citizenship status (Canadian citizen or permanent resident of Canada), you must provide your permanent address in Canada, even if it is the same as your Current Mailing Address.		
Address			Address		
City/Municipality	Prov. / State	Postal/Zip code	City/Municipality	Prov. / State	Postal/Zip code
Country					

Personal information will be stored in the Personal Information Bank for the appropriate program.

Application WEB



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Application Profile		
Special initiative		
Applicant family name	Applicant given name	Initials
Current position		
Org. code	Full organization name	
Department/Division		
Name of degree sought through this application		
Organization to award the degree		Start date or expected start date of the program of study for which you seek support
Department/Division	Indicate the number of months of support sought through this application	Expected start date of the award
Title of research proposal		
Confirm the nature of the research requirements of the program		
If the research requirement is coursework, please specify courses		
How many months of graduate studies will you have completed at the expected start date of the award? a) full time _____ b) part time _____		
Does your proposal involve the use of human beings as research subjects? If "Yes", please consult the <i>Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans</i> and submit your proposal to the Research Ethics Board of the institution where you will undertake your graduate or postdoctoral studies. <input type="radio"/> Yes <input type="radio"/> No		
Signature		
The undersigned accepts the terms and conditions as outlined in the corresponding program description; the instructions provided with this form; and any conditions applied to an award pursuant to this application. The undersigned also declares that s/he has forwarded the sealed Letters of Appraisal to SSHRC or the university exactly as received from the referees.		
Applicant name (print)	Signature	Date

Personal information will be stored in the Personal Information Bank for the appropriate program.

Application WEB



Family name, Given name

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Academic Background

List up to 5 degrees, beginning with the highest degree first and all others in reverse chronological order, based on the start date.

Degree type	Degree name	Start date (yyyy/mm)	Expected date (yyyy/mm)	Awarded date (yyyy/mm)
Disc. code	Discipline	Did SSHRC support enable you to get this degree? <input type="radio"/> Yes <input type="radio"/> No		
Org. code	Organization			
Country				
Degree type	Degree name	Start date (yyyy/mm)	Expected date (yyyy/mm)	Awarded date (yyyy/mm)
Disc. code	Discipline	Did SSHRC support enable you to get this degree? <input type="radio"/> Yes <input type="radio"/> No		
Org. code	Organization			
Country				
Degree type	Degree name	Start date (yyyy/mm)	Expected date (yyyy/mm)	Awarded date (yyyy/mm)
Disc. code	Discipline	Did SSHRC support enable you to get this degree? <input type="radio"/> Yes <input type="radio"/> No		
Org. code	Organization			
Country				
Degree type	Degree name	Start date (yyyy/mm)	Expected date (yyyy/mm)	Awarded date (yyyy/mm)
Disc. code	Discipline	Did SSHRC support enable you to get this degree? <input type="radio"/> Yes <input type="radio"/> No		
Org. code	Organization			
Country				
Degree type	Degree name	Start date (yyyy/mm)	Expected date (yyyy/mm)	Awarded date (yyyy/mm)
Disc. code	Discipline	Did SSHRC support enable you to get this degree? <input type="radio"/> Yes <input type="radio"/> No		
Org. code	Organization			
Country				



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Work Experience

List up to five positions you are holding or have held (include academic and relevant non-academic work experience, as well as administrative appointments).

Position		Start date (yyyy/mm)	End date (yyyy/mm)
Org. code	Full organization name		
Department/Division			
Position		Start date (yyyy/mm)	End date (yyyy/mm)
Org. code	Full organization name		
Department/Division			
Position		Start date (yyyy/mm)	End date (yyyy/mm)
Org. code	Full organization name		
Department/Division			
Position		Start date (yyyy/mm)	End date (yyyy/mm)
Org. code	Full organization name		
Department/Division			
Position		Start date (yyyy/mm)	End date (yyyy/mm)
Org. code	Full organization name		
Department/Division			
Position		Start date (yyyy/mm)	End date (yyyy/mm)
Org. code	Full organization name		
Department/Division			



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Credentials - List up to 6 scholarships, fellowships, prizes and other academic awards you have received and think would be the most pertinent to the adjudication of your application.

Category	Name	Source	Duration (Months)	Value / Year awarded

Research Contributions - Provide complete bibliographic references for your research contributions. List contributions by category as described in the instructions.

Large empty box for entering research contributions.



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Areas of Study

The information provided in this section refers to your research/study. Duplicate entries are not permitted.

Keywords

List keywords that best describe your proposed research/study. Separate keywords with a semicolon.

Disciplines

Indicate and rank up to 3 disciplines that best correspond to your research/study.

Rank	Code	Discipline
1		
2		
3		

Areas of Research

Indicate and rank up to 2 areas of research related to your research/study.

Rank	Code	Area
1		
2		

Temporal Period

If applicable, indicate the historical period covered by your research/study.

From	To
<p style="text-align: center;">Year</p> <p style="text-align: center;">_____ BC AD</p> <p style="text-align: center;"> ○ ○</p>	<p style="text-align: center;">Year</p> <p style="text-align: center;">_____ BC AD</p> <p style="text-align: center;"> ○ ○</p>



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Areas of Study (Cont'd)

Geographical Regions

If applicable, indicate and rank up to 2 geographical regions covered by or related to your research/study.

Rank	Code	Region
1		
2		

Countries

If applicable, indicate and rank up to 5 countries covered by or related to your research/study.

Rank	Code	Country	Prov./ State
1			
2			
3			
4			
5			

Languages

Specify your facility in the language(s) required to carry out your proposed program of study.

	Read	Write	Speak	Comprehend aurally
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Family name, Given name

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Referees

Provide information on two referees who will each complete a Letter of Appraisal.

Family name	Given name	Initials
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Org. code	Full organization name
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Department/Division

Family name	Given name	Initials
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Org. code	Full organization name
-----------	------------------------

Department/Division

Transcripts

List all university transcripts appended to this application (e.g., McMaster, Laval). You must include all undergraduate and graduate transcripts.

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Guidelines for Completing the Letter of Appraisal

When writing your appraisal, bear in mind that some members of the multidisciplinary selection committee that reviews applications may not have an intimate knowledge of the field or sub-field in which the candidate proposes to study.

In your Letter of Appraisal you should comment on the following:

- **Academic Excellence** - As demonstrated by academic transcripts, awards and distinctions.
- **Research Potential** - Quality of analytical skills, ability to think critically, ability to apply skills and knowledge, judgement, originality, initiative and autonomy, determination and ability to complete projects within an appropriate period of time—as demonstrated in the description of program of study and by work experience, research contributions.
- **Communication Skills** - As demonstrated in the description of the program of study and by work experience, community involvement and other extracurricular activities (if relevant), and the quality of presentation of the application.

Type your Letter of Appraisal using a **12-point font** and do not exceed the space provided. **Additional pages will not be submitted to the selection committee.**

Once you have completed the Letter of Appraisal, seal the envelope, sign over the seal and return the envelope to the applicant.

Note: If you are the Head of a department and are also completing a Letter of Appraisal on behalf of a candidate, please ensure that another faculty member completes the Departmental Appraisal.

Important

You cannot save a form-fillable PDF file using Adobe Reader (a software available free from the Internet). If you are using Adobe Reader, **you can type your information directly into the form; however, once you close your document, your data is lost.**

We recommend that you compile your information in a word processor document. Once completed, you can then copy and paste this information into the PDF appraisal form. Your data will print only when you exit the field you have just completed. Print and sign the form.

Note: You may purchase Adobe Writer which will let you save your data to a directory.

Help

If you are having problems with your appraisal form, please consult the Frequently Asked Questions or contact the SSHRC Helpdesk by telephone at 613-995-4273 or by E-mail at webgrant@sshrc-crsh.gc.ca.

Letter of Appraisal

J. A. Bombardier CGS - Master's

URGENT - DEADLINE MATERIAL
MUST BE RETURNED TO THE
APPLICANT IN A SEALED ENVELOPE BY:

Note: Also available as a form-fillable PDF file at www.sshrc.ca.

Name of applicant Test Fileds, Losing values aaaa	Telephone () Ext.
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Address

The information you provide is for adjudication purposes only. It is retained in the applicant's file and is protected by the federal *Privacy Act* or by corresponding provincial legislation. Federal legislation permits reviewer comments to be disclosed to the candidates, except for references to other persons and their identities, and except for the name and personal information of the reviewer. Provincial legislation may vary.

I have <input type="checkbox"/> read <input type="checkbox"/> not read	the applicant's program of study.
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Comments

I have known the applicant in my capacity as _____ for _____ years.

Name of referee (print)

Subject field	Department/Division
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Academic rank	Organization
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E-mail

Telephone number	Date	Signature
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Guidelines for Completing the Letter of Appraisal

When writing your appraisal, bear in mind that some members of the multidisciplinary selection committee that reviews applications may not have an intimate knowledge of the field or sub-field in which the candidate proposes to study.

In your Letter of Appraisal you should comment on the following:

- **Academic Excellence** - As demonstrated by academic transcripts, awards and distinctions.
- **Research Potential** - Quality of analytical skills, ability to think critically, ability to apply skills and knowledge, judgement, originality, initiative and autonomy, determination and ability to complete projects within an appropriate period of time—as demonstrated in the description of program of study and by work experience, research contributions.
- **Communication Skills** - As demonstrated in the description of the program of study and by work experience, community involvement and other extracurricular activities (if relevant), and the quality of presentation of the application.

Type your Letter of Appraisal using a **12-point font** and do not exceed the space provided. **Additional pages will not be submitted to the selection committee.**

Once you have completed the Letter of Appraisal, seal the envelope, sign over the seal and return the envelope to the applicant.

Note: If you are the Head of a department and are also completing a Letter of Appraisal on behalf of a candidate, please ensure that another faculty member completes the Departmental Appraisal.

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Help

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Letter of Appraisal

J. A. Bombardier CGS - Master's

URGENT - DEADLINE MATERIAL
MUST BE RETURNED TO THE
APPLICANT IN A SEALED ENVELOPE BY:

Note: Also available as a form-fillable PDF file at www.sshrc.ca.

Name of applicant		Telephone
		() Ext.
Address		
The information you provide is for adjudication purposes only. It is retained in the applicant's file and is protected by the federal <i>Privacy Act</i> or by corresponding provincial legislation. Federal legislation permits reviewer comments to be disclosed to the candidates, except for references to other persons and their identities, and except for the name and personal information of the reviewer. Provincial legislation may vary.		
I have <input type="checkbox"/> read		<input type="checkbox"/> not read the applicant's program of study.
Comments		
I have known the applicant in my capacity as _____ for _____ years.		
Name of referee (print)		
Subject field	Department/Division	
Academic rank	Organization	
E-mail		
Telephone number	Date	Signature

Personal information will be stored in the Personal Information Bank for the appropriate program.

Master's Scholarship (PDF 2009)

Canada



Guidelines for Completing the Departmental Appraisal

Complete this form if you are evaluating an applicant for a Canada Graduate Scholarships - Master's and you are the head of the department or the designate. Before you start completing the form-fillable PDF, make sure you have the applicant's completed Canada Graduate Scholarships - Master's application form, along with his or her official academic transcripts.

Please do not exceed the space provided, as additional pages will not be accepted.

Note: The proposed supervisor must not complete this form.

Complete this form for all CGS - Master's applicants that must apply through the university.

1. Describe the applicant's research potential (e.g., quality of analytical skills, ability to think critically, ability to apply skills and knowledge, judgement, originality, initiative and autonomy, determination and ability to complete projects within an appropriate period of time).

In addition, comment on the applicant's communication skills as demonstrated in the description of the program of study and by work experience, community involvement and other extracurricular activities (if relevant) and the quality of presentation of the application.

2. If the applicant is currently enrolled in or intends to pursue a master's or combined MA/PhD program at your institution or has indicated that they intend to take up the award at your institution, comment on the research requirements of that program.
3. Has the applicant maintained a first-class average (as determined by your institution) in each of his or her last two years of full-time study? If you are nominating an applicant for a CGS award who has not achieved a first-class average in each of the last two years of study, you must provide a strong rationale for the recommendation, because such applications will be submitted to the CGS-Master's Committee for evaluation.
4. Indicate the weighted annual averages (grade point, percentage) for each of the last two completed years of study. Annotate the transcripts (do not highlight) to indicate which courses you have used in the calculation.

Submitting this Appraisal

For applications being submitted through a Canadian university

Submit the following documents to the office responsible for managing this program at your university:

- Completed application form and required attachments
- Departmental Appraisal
- All university level transcripts
- Application Checklist

If you are the Head of a department and are also completing a Letter of Appraisal on behalf of an applicant, please ensure that another faculty member completes the Departmental Appraisal.

For applications being submitted directly to SSHRC

The Departmental Appraisal is not required for those who are applying directly to SSHRC.

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We recommend that you compile your information in a word processor document. Once completed, you can then copy and paste this information into the PDF appraisal form. Your data will print only when you exit the field you have just completed. Print and sign the form.

Note: You may purchase Adobe Writer which will let you save your data to a directory.

Help

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Departmental Appraisal

URGENT - DEADLINE MATERIAL

Note: Also available as a form-fillable PDF file at www.sshrc.ca.

For Master's Scholarships - applicants applying through a Canadian university					
To be completed by the department head or the person designated on behalf of the departmental committee.					
Full name of applicant		Country code	Area code	Number	Extension
1. Describe the applicant's (a) research potential and (b) communication skills. Highlight both strengths and weaknesses.					
2. If the applicant is enrolled in or intends to pursue a master's or combined MA/PhD program at your institution, comment on the research requirements of that program.					
3. Has the applicant maintained a first-class average (as determined by your institution) in each of his or her last two years of full-time study or equivalent? <input type="radio"/> Yes <input type="radio"/> No If no, explain					
4. What is the applicant's average? Second last year _____ / _____ (maximum) Last year _____ / _____ (maximum)					
For department and institution					
Full name of department head or designate (print)		Signature		Date	
Full name of organization			Department		
Country code		Area code	Number	Extension	E-mail
Telephone					



Family name, Given name

J. A. Bombardier CGS - Master's

Application Checklist	Included
1. Completed and signed copy of the application form with all parts identified with your name	
Attachments	
2. Program of Study (maximum 2 pages)	
3. Bibliography and Citations (maximum 5 pages)	
4. Research contributions, if applicable (maximum 1 page)	
5. All undergraduate level transcripts	
6. All graduate level transcripts	
7. Two (2) completed Letters of Appraisal in sealed envelopes	
8. The Departmental Appraisal (those applying through a Canadian university)	
9. Application Checklist	