



LOO GEOK ENG FOUNDATION GRADUATE SCHOLARSHIP

Application Instructions: Please complete this form and submit along with:

1. curriculum vitae
2. a copy of your transcripts (ROSI transcripts are acceptable)
3. letter of recommendation from student supervisor plus 2 additional letters of support

Please print:

LAST NAME: Swarup GIVEN NAMES: Arushri

STUDENT NUMBER: 998866071

COUNTRY OF CITIZENSHIP: Canada

EMAIL ADDRESS: arushri.swarup@mail.utoronto.ca

PROGRAM START DATE: 06-Sep-2016

SUPERVISOR: Dr. Jan Andrysek and Dr. Adrian James

Please provide information on any funding received to date and/or future possible funding for which you have applied: The student's stipend will be funded by the Department of ORL-HNS at the Hospital for Sick Children, will be applying for a POS Innovation Grant from the Hospital for Sick Children, IBBME Director's Innovation Award, the Wallberg Research Fellowship and the Frank Howard Guest Bursary.

Please list the persons who are providing letters of recommendation in support of this application:

A) THESIS SUPERVISOR:

Name: Dr. Adrian James Department: ORL-HNS at the Hospital for Sick Children

B) ADDITIONAL LETTER SUBMITTED BY:

Name: Dr. Jan Andrysek Department: IBBME

Is referee a member of student's supervisor committee: ☒ Yes ☐ No

C) ADDITIONAL LETTER SUBMITTED BY:

Name: Dr. Dawn Kilkenny Department: IBBME



Institute of Biomaterials
& Biomedical Engineering
UNIVERSITY OF TORONTO

Is referee a member of student's supervisor committee:

☐ Yes

☒ No