

APPLICATION FOR VPR-USRA (UNDERGRADUATE STUDENT RESEARCH AWARD)

Please forward this completed form to the department where the USRA will be held by that department's deadline.

APPLICANT INFORMATION

To be completed by the student. Hand written applications will not be accepted.

All correspondence regarding this application and award will be sent to the email address provided.

First name	Surname
Student number	Email
Department	
Citizenship: <input type="checkbox"/> Canadian Citizen <input type="checkbox"/> Permanent Resident as of _____ Other: _____	

AWARD INFORMATION

I am applying for a: <input type="checkbox"/> VPR USRA — Sciences <input type="checkbox"/> VPR USRA — Social Sciences & Humanities (Full Time) <input type="checkbox"/> VPR USRA — Social Sciences & Humanities (Part Time)	My research involves (check all that apply): <input type="checkbox"/> Data-intensive tools <input type="checkbox"/> Data-intensive approaches <input type="checkbox"/> Data-intensive analysis
For part time awards, you may take up to three courses with your supervisor's approval. Full time USRA holders can take two courses, with the supervisor's permission. Number of courses in which you will be registered during the term of the award: _____	
The term in which you wish to hold the award: <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Spring	
Proposed Supervisor	
Proposed Department	

ACADEMIC BACKGROUND ☐ Copy of your SFU transcript is attached (an unofficial transcript is acceptable)

Degree	Major (and Minor if applicable)	Completion Date (actual or expected)

SIGNATURE OF STUDENT

I hereby agree to abide by the Terms of Reference for this award.

Signature of Student	Date Signed
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If you self-identify as Black and you qualify for the SFU VPRA awards, you may also be considered for NSERC, CIHR and SSHRC USRA's.

For the purposes outlined above, do you disclose that you self-identify as Black and understand that this information will be shared with the institution to which you are applying and, if awarded, publicly?

☐ Yes ☐ No

INTERNAL USE ONLY

- ☐ Copy of SFU transcript attached (student is registered in bachelor's term prior to award)
- ☐ CGPA in bachelor's is minimum 2.67
- ☐ Student has held 2 or less URSRA's previously (max. 3/student incl. all USRA programs)
- ☐ Student's role is outlined in supervisor's portion
- ☐ Start and end dates given by supervisor covers 16-week duration

Freedom of Information and Protection of Privacy

The information on this form is collected under the authority of the University Act (RSBC 1996, c. 468) and is needed to process your application for a graduate scholarship or award. The information will be used to verify qualification and decide your eligibility for the award. If you receive the award, this information will form part of your student record and may be shared with SFU University Advancement to inform the award's funder and SFU Communications, for media releases. If you have any questions about the collection, use and disclosure of this information please contact the Graduate Awards Manager, Graduate Studies, 778-782-3042 or by email to gpsaward@sfu.ca.

APPLICATION FOR VPR-USRA (UNDERGRADUATE STUDENT RESEARCH AWARD)

To be completed by the proposed supervisor only

SUPERVISOR INFORMATION

All correspondence regarding this application and award will be sent to the email address provided.

First name	Surname
Title	Department
Email	
Type of Research Grant <input type="checkbox"/> NSERC <input type="checkbox"/> SSHRC <input type="checkbox"/> CIHR <input type="checkbox"/> Other:	
SFU Grant Account #	
Title of currently active Research Grant	

RESEARCH PROJECT

Student name
Proposed start and end dates (must cover a 16-week period)
Outline of research project including a description of the student's role
Benefits to the student from contributing to this research project (What skills and knowledge will the student acquire? Point form may be used.)

SIGNATURE OF SUPERVISOR

I hereby certify that the student will participate in research and development activities as written above during the proposed period of tenure.

Signature of Supervisor	Date Signed
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