

SECTION 1 – GRADUATE STUDENT INFORMATION

Student I.D. (mandatory)					
Employee I.D.			S.I.N.		
Family Name			Given Names		
Gender	Female	Male	Date of Birth	YYYY / MM / DD	
Address					
Telephone No.		Internal Address		Internal Tel. No.	

SECTION 2 – RESEARCH PROJECT INFORMATION

Name of Principal Investigator (Please print)				
Student Type - Canadian or Permanent Resident	Master student 77300		PhD. Student 77310	
Student Type - Foreign or International	Master student 7730F		PhD. Student 7731F	
Grant Number				
Granting Agency				
Total amount of bursary	Annual		OR Period	
Start date	YYYY / MM / DD		End date	YYYY / MM / DD

NATURE OF TASK TO BE PERFORMED

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SECTION 3 – ATTESTATION

I hereby confirm that the purpose of this bursary is to enhance the above-mentioned individual's research qualifications towards a

_____ in the field of _____
(Name of degree / scholastic recognition / research thesis)

I confirm that the working relationship will be solely that of a supervisor to a trainee and that there will be no other tasks, clerical or other, required from this trainee in the course of the project.

I understand that it is my responsibility to ensure that the payment of bursaries to research assistants is allowable by the granting agency.

Please refer to the "GRADUATE STUDENT BURSARY GUIDELINES" at [HTTP://FS.CONCORDIA.CA/index.php?go=7](http://fs.concordia.ca/index.php?go=7) under "RESTRICTED FUNDS" for further instructions as to when payments of bursaries to graduate students are permitted.

SIGNATURES

Principal Investigator	Michael T Hallett	YYYY / MM / DD
Student	Shawn Simpson	YYYY / MM / DD
Department Chair		YYYY / MM / DD