



**GRADUATE STUDENT ENDOWMENT FUND AWARD(GSEF)
2016-17 APPLICATION FORM**

NAME OF AWARD APPLIED FOR:	
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A. APPLICANT INFORMATION			
First Name:	Last Name:	Initials:	
U of T Student Number:	Email Address:	Telephone:	
Home Address:			Unit/Apt.:
City:	Province:	Postal Code:	

B. APPLICANT GRADUATE PROGRAM (at time of tenure of award)		
U OF T Graduate Department:		
Graduate Coordinator Name:	Email Address:	Telephone:
Degree Program:		
Masters	PhD	Year of Study: _____
Location of Research (University Bldg, Hospital Research Institute name, or off campus location)		
Are you enrolled in a clinician-scientist trainee program?		
YES	NO	If yes, indicate your U of T Clinical Department: _____

C. APPLICATION ATTACHMENTS	
Short Description of Research Attach, in easily understandable terms, one-page letter summarizing your research, and evidence of involvement and interest in extra-curricular activities.	YES
Transcripts First year Masters students – attach transcript for 4 th year undergraduate degree Current Masters or PhD students – attach transcript for the current degree program	YES
Letter of Recommendation Attach letter of recommendation of support from supervisor	YES

Financial Needs Assessment Form: (if required by the GSEF award conditions) Attach completed Financial Needs Assessment Form	YES N/A
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D. DECLARATION

I hereby declare that all information given on this application is true and complete in every respect. I understand that I may be required to repay all or part of the award if the information is found to be inaccurate for any reason.

_____ Student Name (printed)	_____ Signature	_____ Date
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_____ Supervisor Name (printed)	_____ Signature	_____ Date
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