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| **1. CONTACT AND PERSONAL INFORMATION** |
| ***Name :***  Last Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  M :  F :   ***Current address :***  N° : \_\_\_\_\_\_\_\_ Street : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ app : \_\_\_\_\_  City : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province : \_\_\_\_\_\_ Postal Code : \_\_\_\_\_\_\_\_  Phone number : ( ) - Other : ( ) -  E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***Date of Birth :***  Year : \_\_\_\_\_ Month : \_\_\_\_\_ Day : \_\_\_\_\_  ***Status in Canada :***  Canadian citizenship   Permanent residency  |
| **2. EDUCATIONAL INFORMATION** |
| ***University attended by the applicant :***  Name of the institution : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Academic programme : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Registration’s date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **3. DOCUMENT CHECK LIST** |
| *Please include the following documents*   ***Curriculum vitae***   ***Bibliography of your publications***   ***Description of the research project***   ***Official transcripts of 1st, 2nd and 3rd cycles***   ***Recommendation letters (4)*** |
| **4. SIGNATURE AND AUTORISATION** |
| I certify all information contained herein is true and completed to the best of my knowledge. I also agree to share the results of my research project with the MCFR.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Location (City) |