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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) |