

**NSERC-CREATE
Complex Dynamics**

Application for a Graduate Scholarship

Instructions for submission: Applicants please complete and submit all 5 pages of this form-fillable application to: dynamics.create@gmail.com by **March 8, 2021**. Signatures can be completed electronically or by hand.

Les candidatures peuvent être soumises en français

| | | | | | |
|---|------------------|------------------------------|--|-------------------------------|---------------------------------|
| Family name of applicant | | Given name | | Initial(s) of all given names | Date (mo/dd/yyyy) |
| ADDRESSES. Changes to any of the information below must be sent to dynamics.create@gmail.com. | | | | | |
| Current address | | | Permanent mailing address (if different than current address) | | |
| If current address is temporary, indicate leaving date | | | Telephone number at permanent mailing address | | |
| Telephone number | Facsimile number | | E-mail address (CD-Create will use this as the point of contact) | | |
| CITIZENSHIP | | | | | |
| Canadian citizen | | Permanent resident of Canada | | Other | |
| | | | | | Indicate country of citizenship |
| GENDER (completion optional) | | | DESIGNATED GROUPS (completion optional) | | |
| Male | Female | | Aboriginal | Visible minority | Disabled |
| LANGUAGE CAPABILITY (completion optional) | | | | | |
| English | Read | Write | | Speak | |
| French | Read | Write | | Speak | |
| SIGNATURE | | | | | |
| <p>I hereby agree to participate in the CD network's research and professional development activities, and that any award made to me as a result of this application will be subject to the general conditions governing scholarships and fellowships. These conditions are outlined in the NSERC <i>Program Guide for Students and Fellows</i>, and <i>Visiting Fellowships in Canadian Government Laboratories guide</i>.</p> | | | | | |
| | | | | | <hr/> Applicant's signature |

Personal information collected on this form
will be kept confidential.

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Supervisor must complete the bottom of this page, sign and email this page to: dynamics.create@gmail.com by **March 8, 2021**. Signatures can be completed electronically or by hand.

| Family name of applicant | Given name | Initial(s) of all given names | Date (mo/dd/yyyy) | |
|---|--------------------|-------------------------------------|------------------------|---------------------------------|
| ACADEMIC BACKGROUND (include only current and past degree programs) | | | | |
| Degree | Name of discipline | Department, institution and country | Month and year started | Month and year awarded/expected |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| CREATE SUPERVISOR INFORMATION | | | | |
| Source of funding (supervisor pledges \$1000 toward trainee's annual stipend and \$1000 toward the trainee's annual CREATE conference travel) | | Grant number (proposed supervisor) | | |
| CREATE supervisor agrees to present short tutorial at trainee workshop within year of trainee receiving funds. | | | | |
| SIGNATURE | | | | |
| I hereby certify that the trainee will participate in the CD-CREATE network's research and professional development activities, and will participate in a 4-month internship during the proposed period of the award. I have read the trainee's completed application form. | | | | |
| _____ Signature of proposed supervisor | | _____ date | | |

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| |
|---|
| Family name, given name and initial(s) of applicant |
|---|

| | | | | | | | |
|--|--|---------------------|--|---|--|--|--|
| Proposed starting date of award | | | | Proposed duration of award (can be 1-2 years) | | | |
| Current degree program (e.g. Bachelors, Masters, Doctorate) | | | | Proposed complex dynamics theme of study/research | | | |
| Title of proposed research | | | | | | | |
| List ten (10) key words that describe your proposed research. Use commas to separate them. | | | | | | | |
| PROPOSED LOCATION OF TENURE | | | | | | | |
| Institution/organization | | Department | | Program | | Proposed supervisor, with title and email address | |
| | | | | | | | |
| Indicate the total number of months of graduate studies (master's and doctoral) you have completed as of December 31 of the year of application in the natural sciences and engineering. | | | | | | | |
| _____ months of full-time studies | | | | _____ months of part-time studies | | | |
| Indicate the number of months of studies you have completed, as of December 31 of the year of application, in the program for which you are requesting funding. | | | | | | | |
| _____ months of full-time studies | | | | _____ months of part-time studies | | | |
| Indicate if you are attending university at the time of application. | | | | | | | |
| Attending full time | | Attending part time | | Not attending | | | |

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| SCHOLARSHIPS AND OTHER AWARDS OFFERED (start with most recent and include NSERC, CIHR, SSHRC and provincial awards) | | | | | |
|---|---------------|--|--|--------------------|------------------------------------|
| Name of Award | Value (CDN\$) | Level Institutional, Provincial, National, International | Type Academic, Research, Leadership, Communication | Location of tenure | Period held (yyyy/mm - yyyy/mm) |
| | | | | | |

Internships: Each Graduate Award includes a required 4-month internship with an industry or health care partner (listed at www.cd-create.org). Please indicate your initial preferences below. Trainee-partner interviews will be held after awards are made, after which placements will be mutually agreed upon by trainee and partner.

Requested Start Date of Internship: _____

Choice 1: _____

Choice 2: _____

Choice 3: _____

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Please describe your research plans below, emphasizing the match to the themes of the CD-Create training program described at www.cd-create.org and fit to supervisor.

Empty text area for describing research plans.