Last name and first name of applicant:

**PROJECT TITLE** (en français)

**GRADUATE STUDIES SCHOLARSHIP AND POSTDOCTORAL FELLOWSHIP PROGRAM**

**IN OCCUPATIONAL HEALTH AND SAFETY**

**DECLARATION OF RESEARCH SUPERVISOR (AND CO-SUPERVISOR)**

**\* (Please note that this form may be replaced by a curriculum vitae that includes the information requested in this document and is limited to the last five years of your career) \***

**INSTRUCTIONS FOR APPLICANT:**

* Complete the header section of the Declaration of Research Supervisor (and Co-Supervisor) form.
* Give this form and a copy of your application form to your research supervisor and, if applicable, to your co-supervisor.
* When the documents (Declaration of Research Supervisor or curriculum vitae) are returned to you, attach it/them to your application.
* These documents must be e-mail at the following address: bourses@irsst.qc.ca, either by the candidate with his application form and other required documents or the Supervisor or Co-Supervisor (please indicate the name of the applicant) who filled them in.
* The deadline to submit the documents, and the application, is 4:00 p.m. on the third Wednesday of October.

**INSTRUCTIONS FOR RESEARCH SUPERVISOR (AND CO-SUPERVISOR):**

*\*\* Reminder: The research supervisor must also submit a letter of recommendation.*

* Please complete all sections of this form and return it to the applicant or send it by e-mail at the following address: bourses@irsst.qc.ca. Please indicate the name of the applicant for whom the documents are sent.
* The information provided must be limited to the past five years of the career of the research Supervisor (and Co-Supervisor).
* A curriculum vitae that includes the information requested in this document and is limited to the last five years of the research Supervisor or Co-Supervisor may replace the Declaration of Research Supervisor (and Co-Supervisor) form. If this option is chosen, please make sure to indicate clearly the name of the applicant for whom the documents are sent.

Last name and first name of applicant:

**IDENTIFICATION OF RESEARCH SUPERVISOR (CO-SUPERVISOR)**

Mrs./Miss/Ms. [ ]  Mr. [ ]  Last name  First name

**CONTACT INFORMATION**

|  |  |
| --- | --- |
| Primary affiliation address | Mailing address*(if different)* |
| Civic number/Street | : |  | Civic number/Street | : |  |
| City | : |  | City | : |  |
| Province/State | : |  | Province/State | : |  |
| Country | : |  | Country | : |  |
| Postal code | : |  | Postal code | : |  |
|  |  |  |  |  |  |
| Telephone (work) | : |  | Telephone (work) | : |  |
| Ext. | : |  | Ext. | : |  |
| E-mail | : |  | E-mail | : |  |

**RESEARCH GRANTS** (over the past five years, beginning with the most recent)

Indicate, if applicable, the funding source(s) directly related to the applicant’s research project.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Researcher(s) | Project title | Funding source | Requested (R)Ob*t*ained (O) | Amount | Yearsfrom to |
|  |  |  |  |  |  |

**RESEARCH AND TEACHING EXPERIENCE AT THE UNIVERSITY LEVEL** (over the past five years, beginning with the most recent)

|  |  |  |  |
| --- | --- | --- | --- |
| Position held\* *Indicate the primary affiliation* | Institution – Country | Department | Yearsfrom to |
|  |  |  |  |

**UNIVERSITY DEGREES AND/OR CREDENTIALS OBTAINED** (beginning with the most recent)

|  |  |  |  |
| --- | --- | --- | --- |
| Degrees and/or credentials | Discipline | Institution – Country | Year obtained |
|  |  |  |  |

Last name and first name of applicant:

**SUPERVISION OF GRADUATE STUDENTS AND POSTDOCTORAL FELLOWS** (over the past five years, beginning with the most recent)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Project title | Name of student | Supervision (S) orCo-supervision (C) | Level of studies | Beginning(mm/yyyy) | End(mm/yyyy) |
|  |  |  |  |  |  |

**SCIENTIFIC PUBLICATIONS, PRESENTATIONS AND COMMUNICATIONS** (over the past five years, beginning with the most recent)

Identify your peer-reviewed publications, and if applicable, those that are specifically related to the applicant’s research field.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE**

Date:  Signature: