

ONTARIO GRADUATE SCHOLARSHIP APPLICATION

(For use by *current* TMU students who
have *not* applied for Tri-Council Funding)

Eligible returning students must complete and submit this application form to their program office. As deadlines are set by the program, please consult with your graduate program to know the date.

SECTION 1 – Personal Information				
Last Name, First Name:			Date of Birth (MM/DD/YYYY):	
SECTION 2 – Permanent Canadian Address				
Suite/Apt. No:		No. and street address:		
City/Town:		Province:	Postal/Zip code:	
Email address:			Phone no. (daytime):	
SECTION 3 – Citizenship Status				
Canadian Citizen	Permanent Resident	Protected Person	Temporary Resident VISA – Student Study Permit	Aboriginal (First Nations Status/ Non-status, Metis or Inuit)
If you selected Permanent Resident, Protected Person or Temporary Resident VISA – Student Study Permit, please provide the date your residency status was received (M/D/YY):				
SECTION 4 – OGS Eligibility				
The eligible student must not have exceeded the lifetime maximum of six (6) years of government-funded student awards. Please indicate if you have received any of these awards:				
Yes:	No	Social Sciences and Humanities Research Council (SSHRC)	Start date:	End date:
Yes:	No:	Natural Sciences and Engineering Research Council (NSERC)	Start date:	End date:
Yes:	No:	Canadian Institute of Health Research (CIHR)	Start date:	End date:
Yes:	No:	Ontario Graduate Scholarship (OGS)	Start date:	End date:
Yes:	No:	Queen Elizabeth II Graduate Scholarship in Science and Technology (QEIGSST)	Start date:	End date:
Yes:	No:	Ontario Trillium Scholarship (OTS)	Start date:	End date:
Yes:	No:	Vanier Canada Graduate Scholarship (Vanier CGS)	Start date:	End date:
SECTION 5 – Current Ontario Student Assistance Plan (OSAP) Status				
The eligible student must be in good standing with previous and current OSAP loans. Please indicate below:				
Yes:	No:	Have you previously received an OSAP loan?		
Yes:	No:	Is your loan currently in good standing?		

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SECTION 6 – Referees (Provide information on two referees who will each complete a Letter of Appraisal)

Last name:	First name and initials:
Full organization name:	
Department:	Title/position:

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Full organization name:	
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Notices, Consents, Declaration and Signature of Applicant

Notice regarding Privacy Protection

In accordance with Section 39(2) of the Freedom of Information and Protection Privacy Act (“FIPPA”), the information in my Ontario Graduate Scholarship (OGS) application is collected under the authority of the Toronto Metropolitan University (TMU) Act 1977 and will be used by the University to award and administer all aspects of the OGS program and required reporting to the Ministry of Training, Colleges and Universities (MTCU) and other related or consistent purposes. All personal information that is collected will be used, stored, and destroyed in accordance with TMU's Information Protection and Access Policy. If you have questions about the collection, use and disclosure of this information by TMU, please contact the Scholarship Liaison Officer in the Yeates School of Graduate Studies, Toronto Metropolitan, 350 Victoria St.

Toronto, Ontario, M5B 2K3, (416) 979-5365.

Applicant's Consent to the Indirect Collection and Disclosure of Personal Information

I agree that TMU may, without limitation, collect, use and disclose personal information that is relevant to the administration and financing of OGS with: my academic references; SSHRC; NSERC; CIHR; bodies identified on this application form and other bodies, including government bodies within and outside Canada that administer scholarships for graduate study or student loans; the panel appointed to assess my application, and the Ministry of Training, Colleges, and Universities.

I agree that TMU can, without limitation, collect use and disclose personal information about me that is relevant to the consideration of my OGS application and its report to MTCU with respect to the granting of the OGS with: the MTCU, my academic references and my program.

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Applicant's Declaration

- I agree to the use of my admission application file and/or Tri-council funding application and/or generic OGS application and/or student file will be used for this competition and I understand that it forms part of the OGS application.
- I have given complete and true information on this application form and in the required supporting documentation.
- I understand that I am responsible for providing all required supporting documentation as indicated on my application or as directed by TMU in respect of my eligibility for an OGS.
- I understand that information I provide will be verified and audited and the university may also conduct inspections and investigations. I will keep a copy of my application and all required supporting documentation in the event that I am required to produce this information for audit, verification, and inspection or investigation purposes.
- I will promptly notify TMU in writing of any changes to the information I have provided and of any changes to my eligibility for an OGS, including ceasing to be enrolled full-time in an eligible program at TMU; receiving an NSERC, SSHRC, CIHR, Vanier, Trillium or QEII-GSST.
- I understand that any change to the information I provide and any change resulting from verification and audit will result in reassessment.
- I understand that if my application is reassessed, it may affect my eligibility and the amount of my OGS
- and, if required I will promptly repay all or part of my OGS
- I understand that all adjudication decisions are final.

I have read and understood this section, including the notice of collection, use and disclosure of my personal information and my signature attests to my consent to the indirect collection, use and disclosure of my personal information and that my declaration is complete and true. I understand that any fraudulent or misleading statement may result in proceedings for academic misconduct.

NAME OF APPLICANT (PRINT/TYPE):

DATE:

SIGNATURE OF APPLICANT:

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Plan of Study/Research Proposal 2 page maximum

Name of applicant:	Student number:
Program:	

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Works Cited or Bibliography (supports your Plan of Study/Research Proposal) 5 page maximum

Name of applicant:	Student number:
Program:	

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Research Contributions 2 page maximum

Name of applicant:	Student number:
Program:	