# **School of Graduate Studies** GRADUATE AWARDS OFFICE

## GENERAL AWARD APPLICATION FORM

# JOHN F. LEMIEUX FELLOWSHIP IN GENOCIDE AND HUMAN RIGHTS STUDIES

GENERAL INFORMATION (All informati	on must be typed of printed clearly)
FAMILY NAME Please print family name in capital letters	SOCIAL INSURANCE NUMBER
GIVEN NAME	FORMER BIRTH NAME
EMAIL	
ADDRESS (for correspondence)	
STREET NUMBER/NAME AI	T. NO MUNICIPALITY
PROVINCE/STATE/COUNTRY POSTAL CODE	PHONE NUMBER (HOME)
<ul><li>2) a list of all publications and releva</li><li>3) research proposal clearly indicatin human rights studies (maximum 500</li><li>4) an up to date curriculum vitae;</li></ul>	ity studies (bachelor, master, doctoral); nt professional and research experience; g your area of research in genocide and
<ol> <li>unofficial transcripts of all universes</li> <li>a list of all publications and releva</li> <li>research proposal clearly indication human rights studies (maximum 500</li> <li>an up to date curriculum vitae;</li> <li>one letter of recommendation from</li> </ol>	ity studies (bachelor, master, doctoral); nt professional and research experience; g your area of research in genocide and words); n your supervisor or a faculty member who
1) unofficial transcripts of all universed 2) a list of all publications and relevariations are relevariated as a list of all publications and relevariated as a list of all publications and relevariation and relevariation from the state of the sta	ity studies (bachelor, master, doctoral); nt professional and research experience; g your area of research in genocide and words); n your supervisor or a faculty member who

#### SUBMIT COMPLETED APPLICATION

Completed applications must be received by the application deadline with all required documents attached. Applications are to be submitted to MIGS (address below):

**DEADLINE DATE: September 30<sup>th</sup> at noon**MONTREAL INSTITUTE FOR GENOCIDE AND HUMAN
RIGHTS STUDIES (MIGS)
FB 804 (1250 rue Guy, 8th floor)

### THIS DECLARATION IS TO BE SIGNED BY ALL APPLICANTS

I do hereby declare that the information provided on this application and on the documents which accompany it are true, accurate, and complete.

An important part of the University's relationship with its donors is the preparation of annual reports about the status of donated funds, and confirmation to donors that recipients have been selected for their fellowships, scholarships, awards, teaching assistantships. In addition to confirming the status and value of the fellowship/scholarship/award/teaching assistantship to donors, the recipient information provided in these annual donor reports includes:

- i) Student's last name & first name
- ii) Student's program of study (e.g. M.A.Sc. Mechanical Engineering),

By applying to the award and should my application be successful, I hereby **agree** to the release of the information contained in my application (including the information listed above) to the donor of the fellowship, scholarship, award, or teaching assistantship and for the purpose of including such information in the annual report as well as for use in marketing materials and publications.

Date:

Signature.	
FOR OFFICE USE ONLY	Application received:  Verified by:  Notes:

Signature: