

Natural Sciences and Engineering Research Council of Canada

Research Council of Canada

Social Sciences and Humanities

Instituts de recherche en santé du Canada

Conseil de recherches en sciences naturelles et en génie du Canada

Conseil de recherches en sciences humaines du Canada

## SEND THE COMPLETED FORM TO THE AUTHORIZED INSTITUTIONAL OFFICE RESPONSIBLE FOR ADMINISTERING THE INSTALMENT

## Request for first instalment or reinstatement of award paid by Canadian institution

Part I: AWARD HULDER I	NEU RIVLA LIU	JN		
Family name			Given name and initial(s)	
Email address			Telephone number	
Mailing address		EODM ATKON	T4A mailing addre	ess (if different)
Part 2: AWARD AND INSTITUTION INFORMATION				
	·· CIHR	·· NS	ERC	·· SSHRC
Registration/award status:	☐ Full-time ☐ Part-time (must have approval of agency and institution)			
Type of award		Application number		Committee number (NSERC only)
Faculty/department		Institution		Research institution (CIHR only)
Part 3: INSTALMENT/REINSTATEMENT				
First instalment (NSERC and SSHRC only)  I have provided a copy of the relevant award documentation (e.g., Notice of award/decision) to the awards administration officer at the host institution  "Reinstatement of award  "Documents attached, if required (CIHR only)				
Award start date: mm/dd/yyyy		Award reinstatement date: mm/dd/yyyy		
☐ I have provided a copy of this form to the authorized institutional office responsible for administering the instalment.				
Signature of award holder:			Da	te:(mm/dd/yyyy)
Part 4: CONFIRMATION OF STATUS  To be completed by an awards administration officer or equivalent official in the faculty of graduate studies (or its equivalent) at the host institution				
<ul> <li>Instalment: I confirm the award holder is/will be registered as a student or engaged in research at the registration/award status indicated above.</li> <li>Reinstatement: I confirm the award holder has returned from an approved leave of absence and will be/is resuming studies/research for which funds were awarded.</li> </ul>				
Name of official (print):			Title:	
Signature of official:		:	Date:	(mm/dd/yyyy)