



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

Request for deferment of start date or interruption of award

Part 1: AWARD HOLDER INFORMATION

Form section for Part 1: AWARD HOLDER INFORMATION, including fields for Family name, Email address, Mailing address, Given name and initial(s), Telephone number.

Part 2: AWARD AND INSTITUTION INFORMATION

Form section for Part 2: AWARD AND INSTITUTION INFORMATION, including fields for Type of award, Faculty/department, Application number, Institution, Committee number (NSERC only), Research institution (CIHR only).

Part 3: REQUEST(S)

Form section for Part 3: REQUEST(S), including text for 'I hereby request:' and options for deferment or interruption with reasons like Parental, Medical, Family-related responsibilities, etc.

Signature and Date fields for the award holder.

Part 4: CONFIRMATION OF APPROVAL (to be completed by the award holder's supervisor and an authorized institutional official)

Form section for Part 4: CONFIRMATION OF APPROVAL, including fields for SUPERVISOR and AUTHORIZED INSTITUTIONAL OFFICIAL with Title, Name, Signature, and Date.