

DISCLOSURE OF GRADUATE STUDENT SUPPORT

Biochemistry Graduate Program



Student Name and ID number _____

Degree sought: M.Sc. Ph.D.

The Department of Biochemistry, Microbiology and Immunology (including those in the HMG stream) at the University of Ottawa expects that all students enrolled in its graduate program will possess or will seek an external stipend. Students who have not yet secured stipends must be supported through research grants held by their supervisors **at a minimum level equal to the minimum funding for CIHR Master's Studentships (2010 - \$17,850.00) and will increase in accordance to CIHR standards.** Funds cannot be guaranteed beyond the expiry date of the grant(s). The Department will attempt to seek financial support for students whose supervisors lose their research grants; however, neither the Department nor the University of Ottawa is responsible for providing financial support to any student.

The Department expects that supervisors who succeed in maintaining their operating grants will support for two years those students enrolled in the M.Sc. Program and for four years those students enrolled in the Ph.D. program. Students who enrol in the M.Sc. program and advance to the Ph.D. program without writing a Master's thesis will be supported for five years. Any further support must be negotiated between the student and the supervisor. In the event of unsatisfactory progress in the research program, the supervisor may terminate financial support according to Section C of the [BMI Policies and Procedures for Graduate Programs](#)

Anticipated duration: _____, 20____ to _____, 20____

Guaranteed support: _____, 20____ to _____, 20____

Source: Ontario Graduate Scholarship MRC studentship NSERC studentship
 Supervisor-held grant : stipend \$ _____ /yr Other _____

Type, cost centre and expiry date of grant _____

Students must provide proof of the duration of all scholarships to the Academic Unit upon request. The supervisor may use this space for additional comments before the student affixes his or her signature.

Supervisor's Commitment - By signing this form, you acknowledge that you:

- Have read the student application and interviewed the applicant
- Accept to follow and be aware of the regulations governing the Biochemistry program
- Will take full responsibility in the training and payment of your new graduate student
- Will provide services as advisory committee members, examiners for seminars, posters, Comprehensive exams and thesis.

Name of student	Signature	Date _____, 20____
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Name of supervisor	Signature	Date _____, 20____
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