

Purpose	Aims to encourage public policy research, broadly defined, and advanced training of graduate students from all faculties. The program facilitates research advancement by providing students with a suitable research training experience with Parkland Institute and the University of Lethbridge.		
Eligibility	Canadian Citizen/Permanent Resident/International student entering or continuing in a Master's program		
Value	\$5,000 is dispersed in two allotments of \$2500 (fall and spring terms)		
Criteria	<ul> <li>Full-time graduate at the University of Lethbridge in the semester immediately following the award</li> <li>Be supervised by a University of Lethbridge Faculty member</li> <li>Have a cumulative GPA of 3.5 or higher</li> <li>Plan to return to full-time graduate studies at the University of Lethbridge in the semester immediately following the award</li> <li>The student must submit a detailed letter (no more than four pages) addressing the following: 1) their statement of research interest; and 2) previous awards and scholarships</li> <li>The student must also provide up-to-date official transcript(s) of their entire academic record (including transfer credits)</li> <li>The student must provide a letter of recommendation from a faculty member. This may be the supervising faculty, other U of L faculty, or a faculty member from another post-secondary institution that is known to the applicant</li> </ul>		
Further Information	For the attention of: SGS Awards Advisor Email: <a href="mailto:sgs.awards@uleth.ca">sgs.awards@uleth.ca</a>		
Deadline	May 31 Award Announced by July 31  If the deadline falls on a weekend then submit on the next business day		
Submit	Completed applications returned to: SGS Award Advisor		
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	It is your responsibility to ensure that all requested information is attached and received by the stated deadline. Incomplete or late applications will not be considered. The University of Lethbridge is not responsible for any applications lost in the delivery system.		
FOIP	It is your responsibility to ensure that all requested information is attached and received by the stated deadline. Incomplete or late applications will not be considered. The University of Lethbridge is not		

First Name:	Last Name:			
U of L ID Number:				
Canadian Citizen	Permanent Resident	International		
PERIOD OF STUDY AT THE UNIVERSITY OF LETHBRIDGE:				
Program Semester Start Date:	Program Start Year:			
Program you are currently in:	Year of Study:			
Department:				
SIGNATURE				
This application must be signed. I hereby certify that the information given on this application is complete and true in all respects. If granted an award, I authorize the Scholarships and Student Finance Office to release pertinent information to the donor of the award, various University of Lethbridge departments and the news media.				
Date:	Signature:			

PERSONAL INFORMATION