

NSERC 350 Albert Street Ottawa, Ontario K1A 1H5 Canada

## Form 1B Request for First Instalment (Scholarships and Fellowships Division)



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Family name, given name and initial(s) of award holder	Social Insurar	ce Number (Canadian)	NSERC application number
Department and institution of tenure		Type of award	
Part I: To be completed by award holder			
I hereby request payment of the first instalment of my aw	ard, which I will	take up on Date (day/m	 onth/year)
I expect to work under the terms of my award throughout I discontinue my full-time studies/research, temporarily or			d. I shall inform NSERC immediately if
☐ The instalment cheques for the award should be maile	ed to the followir	ng address:	
Mailing a	ddress (includin	g postal code)	
Tel. No(s).: E-mail:			
☐ The T4A form and other correspondence should be m	ailed to the follo	wing address (if different	from above address):
Mailing a	address (includir	ng postal code)	
Signature of award holder		Date (day/month/year)	
Part II: Confirmation of Admission or Completion of Dinstitution	egree Require	ments – To be complete	ed by authorized official at
1) For PGS holders			
I confirm that the award holder has been admitted uncond	ditionally, effective	/e	
with full-time graduate student status to a:	<b>,</b> ,	D	ate (day/month/year)
☐ master's prog	ram 🗆 d	octoral program	
2) For PDF holders			
I confirm that the award holder has completed all the Ph.	D. requirements	and has successfully de	fended his/her thesis on
Date (day/month/year)			
Signature of Dean of Graduate Studies		Date (da)	//month/year)
Printed name of Dean of Graduate Studies		Printed nar	ne of institution