



**NSERC**

350 Albert Street  
Ottawa, Ontario  
K1A 1H5  
Canada

**Form 2**  
**Request for Subsequent Instalments**  
**and Reinstatement of Award**  
*(Finance Division)*



**PROTECTED when completed**

Family name, given name and initial(s) of award holder	Social Insurance 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 \_\_\_\_\_ instalment of my award for the period from \_\_\_\_\_  
*Date (day/month/year)*  
to \_\_\_\_\_. I expect to work under the terms of my award throughout the period for which for which payment  
*Date (day/month/year)*

is requested. I shall immediately inform NSERC if I discontinue my full-time studies/research, temporarily or permanently, during this period.

Please mail instalment cheque as indicated on my previous instalment request.

Please update my mailing address for:

the instalment cheque       the T4A form

\_\_\_\_\_  
*Mailing address (including postal code)*

Tel. No(s): \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_  
*Signature of award holder*

\_\_\_\_\_  
*Date (day/month/year)*

**Part II: To be completed by the supervisor – Confirmation of continued eligibility for payment**

I confirm that the award holder is currently working under my supervision, is expected to continue to do so for the full period requested, and is making satisfactory progress. Payment of this instalment of the NSERC/NATO award is in order.

\_\_\_\_\_  
*Signature of supervisor*

\_\_\_\_\_  
*Date (day/month/year)*

\_\_\_\_\_  
*Printed name*