



NSERC
350 Albert Street
Ottawa, Ontario
K1A 1H5
Canada

Form 9
Request for Increased Stipend/Balance of Award
(Scholarships and Fellowships 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 request the increased stipend for the balance of my PGS A/PGS M/CGS M/Postgraduate Scholarship M Extension. I have completed the minimum 12 months of full-time graduate study and am currently registered full-time in a doctoral program.
- My PGS A was originally awarded for less than 24 months and I am requesting the balance since I am now registered full-time in a doctoral program.

Signature of award holder *Date (day/month/year)*

Part II: To be completed by Dean of Graduate Studies

I confirm that:

1. the award holder has been admitted **unconditionally** to, and registered in, the doctoral program on _____; and
Date (day/month/year)
2. has completed a minimum of 12 months of full time graduate studies as of _____.
Date (day/month/year)

Signature of Dean of Graduate Studies *Date (day/month/year)*

Printed name