



NSERC
350 Albert Street
Ottawa, Ontario
K1A 1H5
Canada

Form B
Request for Deferment or Interruption of Award – IRDF
(Scholarships and Fellowships Division)



PROTECTED when completed

Family name, given name and initial(s) of award holder	NSERC application number
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Name of organization

Part I: To be completed by award holder

I hereby request permission to:

defer my award (I have enclosed an official academic transcript/copy of my doctoral degree [if not already submitted with application] to confirm that I have successfully completed all requirements for my degree, and relevant documentation supporting my request).

interrupt my award for a period of _____ months, effective _____, for the following reason:
Date (day/month/year)

Illness

Maternity

Child rearing

Health-related family responsibilities

I expect to resume my employment on _____.
Date (day/month/year)

Signature of award holder

Date (day/month/year)

Part II: Support for Interruption or Deferment of Award – To be completed by authorized official at the organization

I have discussed this request with the award holder and support the request.

Date (day/month/year)

Signature of supervisor

Printed name

Date (day/month/year)

*Signature of authorized official
(if different than supervisor)*

Printed name