

General Information

Family, Surname, Last Name		Given First Name		Social Insurance Number	
Address		City		Country	
Email		Telephone		Gender Female Male Other	
Date of birth (mm/dd/yyyy)		Birth Place – City/County		Current Country of Residence	

Citizenship Status (indicate only one)

Canadian Citizen (province of residence)		If not Canadian, country of citizenship	
Permanent Residence – date of landing (mm/dd/yyyy)		Permanent Residency Identification Number (a copy of Permanent Residency card must be provided)	

It is your choice to self-identify if you belong to one or more of the following minority groups that have been designated by the University's equity policy.

Aboriginal Disabled Visible Minority Woman

Education

Have you attended the University of Saskatchewan?		If yes, in what year did you last register		U of S Student Number	
Yes No					

All Previous and Current University Level of Study

Provide a list of academic awards and distinctions in the nominee's CV.

Period of Study		Institution/Organization		Graduate	
From	To	Name of Institution	Discipline	Degree	Year

Name of previous Postdoctoral Institutions, if any	Number of years in position(s)

College of Graduate and Postdoctoral Studies

Room 116 Thorvaldson Building ■ 110 Science Place ■ University of Saskatchewan ■ Saskatoon, SK S7N 5C9 Canada

Email: grad.studies@usask.ca ■ Tel: 306-966-5751 ■ Fax: 306-966-5756

Postdoctoral Appointment at the University of Saskatchewan

Academic Unit Name		Campus Mailing Address			
Faculty Supervisor	Start date (mm/dd/yyyy)	End Date (mm/dd/yyyy)	Is this an extension? Yes No	Extension Start date (mm/dd/yyyy)	Extension End Date (mm/dd/yyyy)
Address where majority of PDF work will be done					

Funding Source (indicate those appropriate)

Recipient of an External Fellowship paid through University payroll system (attach copy of award letter)	Yes	No
Recipient of an External Fellowship not paid through University payroll system (attach copy of award letter)	Yes	No
Stipend paid from Faculty Supervisor's research grant or other University sources	Yes	No
Stipend paid from foreign government (attach copy of award letter)	Yes	No

Annual Stipend Amount (CDN) \$ _____

Must be a minimum annual amount of \$35,000 CDN

Declaration

I agree, if admitted to the University of Saskatchewan, to comply with the regulations of the University. I certify that the particulars furnished on the application are true and complete in all respects and that no relevant information has been withheld. I understand that misrepresentation, falsification of documents, or withholding of requested information in regard to this application are serious offenses that may result in dismissal from the University and/or prosecution under the University's Discipline Regulations and/or the Criminal Code of Canada.

Intellectual Property Understanding

I certify that I have been informed, in writing, by the supervisor of any prior intellectual property agreements covering any research work that I undertake, including the commitments made in the agreements, and any benefits or the lack thereof.

Signature of applicant	Printed name of applicant	Date (mm/dd/yyyy)
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Supervisor

I certify that this PDF is a trainee with me and that the appropriate facilities are in place; and

I certify that I have informed, in writing, this PDF of any prior intellectual property agreements covering any research work that they are to undertake, including the commitments made in the agreements, and any benefits or the lack thereof.

Signature of supervisor	Printed name of supervisor	Date (mm/dd/yyyy)
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Head/Dean

I concur with the above statements and authorize the appointment.

Signature of Head/Dean	Printed name of Head/Dean	Date (mm/dd/yyyy)
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FOR OFFICE USE ONLY

Associate Dean of Graduate Studies	Date (mm/dd/yyyy)
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Checklist

The following must be attached to this registration form:

Signed letter of offer	Signed Intellectual Property Agreement
Applicant's CV	Copy of external award letter (if applicable)
Scan of applicant's passport photo page	Copy of Permanent Residence card (if applicable)
Proof of doctorate degree completion	
E-mail address of staff member responsible for administration of PDF in academic unit: _____	

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