



Recommendation (select one):

I recommend this applicant for a CoMGRAD Award
I do not recommend this applicant for a CoMGRAD Award

Applicant Information:

Name		
Student Number		
Program	MSc	PhD

Referee Information:

Name	
Position	
College of University	
Address	
Email	
Phone	
I serve(d) as his/her	

In a group of 100 students with approximately the same amount of work experience and training the candidate would rank (please enter the numeric value associated with your ranking below):

1. Outstanding Top 10%
2. Above Average Next 20%
3. Average Next 20%
4. Below Average Lower 50%
5. Inadequate Opportunity to Observe

Background Preparation	
Originality	
Research Ability and Potential	
Industry	
Judgement	
Verbal and Written Communication Skills	
Overall Ability	



Statement:

--

Financial Commitment	
<p>By signing this acknowledgment, the supervisor agrees to assume supervisor status for successful, registered applicants. For student applicant who are applying to a CoM graduate program, the signature acknowledges that they will assume a supervisor role should the student be accepted to a program and a CoMGRAD be awarded.</p> <p>The supervisor also agrees to contribute the necessary funds required to match the CoMGRAD award. Please select which amount is correct for your student applicant.</p>	
MSc \$8,000/year for eligible years	
PhD \$10,000/year for eligible years	
Supervisor Signature	
Date	