

General Information

Family, Surname, Last Name	Given First Name	Date of birth (mm/dd/yyyy)	
Email	Telephone	Gender	Pronouns (optional)
Current Address	City	Country	Postal Code
Birth Place – City/Country		Current Country of Residence	

Citizenship Status (indicate only one)

<input type="checkbox"/> Canadian Citizen	Province of residence:
<input type="checkbox"/> Permanent Resident	Date of landing:
	Permanent Residency Identification number:
<input type="checkbox"/> Non-Canadian	Country of Citizenship:

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.

Indigenous Disabled Visible Minority Woman

Education

Have you attended the University of Saskatchewan? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, in what year did you last register?	U of S Student Number	NSID
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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

Postdoctoral Appointment at the University of Saskatchewan

Academic Unit Name	Campus Mailing Address
Faculty Supervisor	Address where majority of postdoctoral 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

Salary 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 Funding Amount (CDN) \$ _____

Must be a minimum annual amount of \$36,000 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 COLLEGE OF GRADUATE AND POSTDOCTORAL STUDIES OFFICE USE ONLY

Start date as PDF at U of S (mm/dd/yyyy)	Start Date Current App't	End Date (mm/dd/yyyy)	Is this an extension? <input type="checkbox"/> Yes <input type="checkbox"/> No	Extension Start date (mm/dd/yyyy)	Extension End Date (mm/dd/yyyy)
Associate Dean of Graduate and Postdoctoral Studies					Date (mm/dd/yyyy)

Checklist

The following must be attached to this registration form:

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

College of Graduate and Postdoctoral Studies

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 Email: grad.studies@usask.ca ■ Tel: 306-966-8759 ■ Fax: 306-966-5756