

## **Open Competition Application Form**

Phone: 780.492.9460 Fax: 780.492.0692

**FACULTY OF GRADUATE & POSTDOCTORAL STUDIES** KILLAM CENTRE FOR ADVANCED STUDIES

tudent ID	Student Last Nar	ne, First Name	
epartment			
•			
ources of Funding			
eptember 1, 2025 to $\iota$	August 31, 2026. I tries that are not c	inee's sources of funding (can be written by student) Please list each source of funding as one of the "Type eategorized under one of the specified "Types of Fun ry.	es of Funding" listed in the first
Type of Fur	ndina	Name of Fund/Descriptor	<u>Total Value</u>
Please list each funding source as one of the following: Bursaries, Graduate Employment Income (Teaching Assistantships, Research Assistantships), External Awards, Internal (U of A) Awards, Student		List the name of any bursaries/awards/loans, state your job title for any employment you are holding, etc.	List the value you have received/will receive from each funding source from Sept 1, 2025 to Aug 31, 2026. If uncertain of the exact amount, please provide an estimate and
Loans, Tuition Supplements or Employment			in brackets after the amount, write: (Estimate)
	that to the hest of	my knowledge, the information provided in this appl	lication and attachments is true
eclaration: I declare t nd that no material ha		, , , , , , , , , , , , , , , , , , , ,	

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