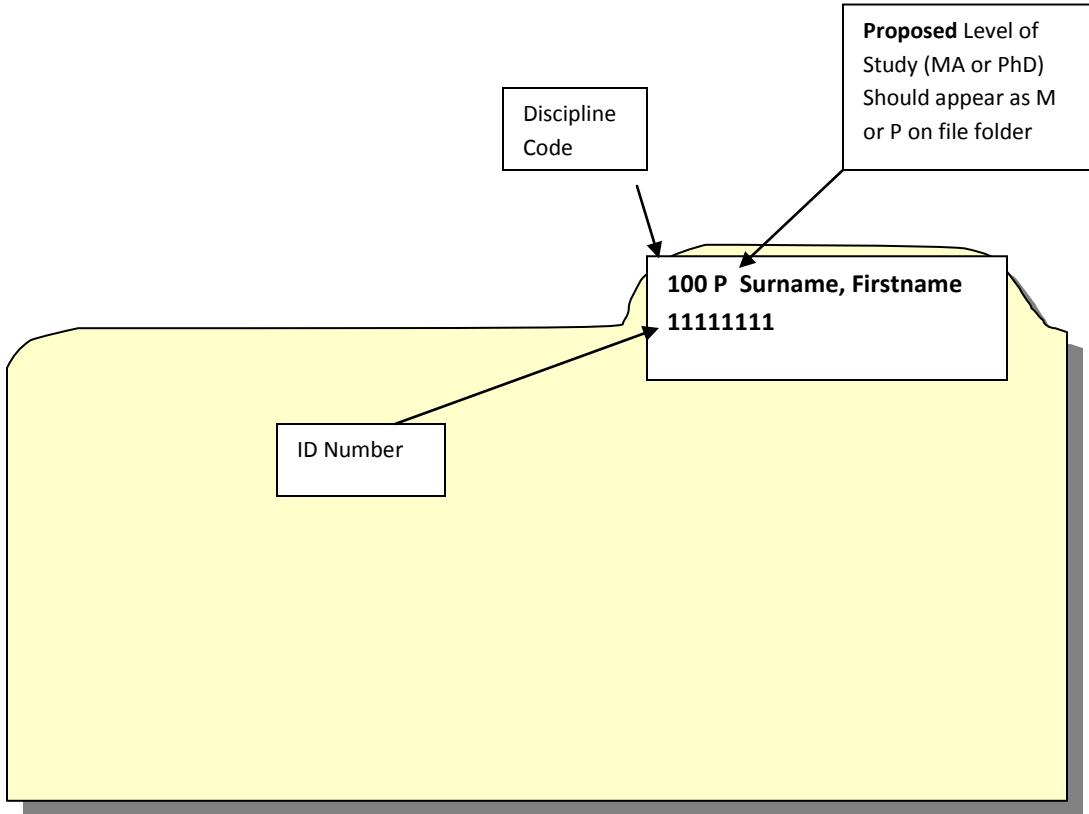




OGS FILE FOLDER SET-UP

** this page is for department staff only*





Instructions: After you submit your 2012-2013 OGS application online you can no longer make changes to it. If any of your *personal information* has changed, enter the new information on this form and forward to the Graduate Studies Office at the university you originally submitted your OGS Application Package.

Personal Information (For Ministry Use Only - Will Not be Shared with OGS Selection Board or Selection Panels)

Basic Personal Identification

Social Insurance Number:

Date of birth:

Day Month Year

Gender:

Male

Female

First name:

Last name:

Permanent Canadian Address

Street name and number, rural route, or post office box:

Apartment:

City, town, or post office:

Province:

Postal Code:

Area code and telephone number:

Mailing Address as of May 2012 (University department address is not acceptable)

Is your mailing address the same as your permanent address?

Yes

No

If "Yes", go to "Other Personal Information" below. If "No", complete mailing address.

Street name and number, rural route, or post office box:

Apartment:

Street, rural route, or post office box:

City, town, or post office:

Province or State:

Region Code:

Postal Code or Zip Code:

Area code and telephone number:

Country:

Other Personal Information

Your citizenship status:

Canadian Citizen

Permanent Resident

Protected Person

Temporary resident visa - student study permit

If you selected Permanent Resident, Protected Person or Temporary resident visa - student study permit, please provide the date your residency status was received:

Date residency status received:

Day Month Year

Ontario Education Number (OEN) if assigned to you by the Ministry of Education:

Correspondence Options

In which language do you prefer to receive correspondence?

English

French

Do you wish to receive e-mails about the status of your application?

Yes

No

E-mail address:

Sharing Your Information

If you wish to have information from your OGS file released by the ministry to anyone other than yourself (e.g., your parent(s) or spouse), you must complete this section. This consent is valid during your 2012-2013 academic year only.

First name:

Last name:

Date of birth:

Day Month Year

First name:

Last name:

Date of birth:

Day Month Year

Signature of Applicant:

Date:

Day Month Year



Student Name: _____

Student Number: _____

Instructions: After you submit your 2012-2013 OGS application online you can no longer make changes to it. If any of your *current status or study information (proposed, current and previous)* has changed, enter the new information on this form and forward to the Graduate Studies Office at the university you originally submitted your OGS Application Package. This form must be received by that office no later than November 16, 2011.

Current Status

1. Are you currently enrolled at a postsecondary school?

Yes No *If "No", go to question 3b*

2. Are you currently enrolled at a postsecondary school in Ontario?

Yes *If "Yes", go to question 3a* No *If "No", go to "Proposed Studies" below.*

3.a) What type of school are you attending (if you are currently enrolled at a postsecondary institution)?

- University
- College in which my program leads to an undergraduate degree
- Other

3.b) Did you or will you graduate from an Ontario university between November 16, 2010 and November 16, 2011?

Yes No

If yes, please enter university name :

Proposed Studies

School you plan to attend:

Division:

Discipline code:

Discipline name:

Proposed level of study for 2012-2013: Master's - year 1 Master's - year 2 Doctorate

Date you expect to receive your degree for your proposed studies (This date cannot be prior to December 2011):

Month Year

Number of terms:

1 term 2 terms 3 terms

Note: you are not eligible if you are in a 1 term program.

Date you expect to begin your proposed studies:

May 2012 September 2012 January 2013

Current Studies

Postsecondary school are you currently attending:

Student number at this school:

Division:

Discipline code:

Discipline name:

Level of your current studies:


- Doctorate
- Master's
- Bachelor's
- Certificate/Diploma/Other/None


 Name _____
 Student #: _____
 Citizenship: _____
 Level of Study: _____
 Discipline: _____
 Submit to: _____
 Deadline: _____

Student Checklist	OGS Application Package	GSO/Dep't Checklist
<i>Student to check items submitted and sign below:</i>	<i>This is your personalized list of items that you must include in your OGS Application Package:</i>	<i>GSO/Dep't to complete and approve for submission to ministry:</i>
Mandatory Items:		
<input type="checkbox"/>	Application Checklist	<input type="checkbox"/>
<input type="checkbox"/>	OGS Application Form - signed Personalized copy of online form (3 pages) or paper application form (4 pages)	<input type="checkbox"/>
<input type="checkbox"/>	Academic Assessment Report 1	<input type="checkbox"/>
<input type="checkbox"/>	Academic Assessment Report 2	<input type="checkbox"/>
<input type="checkbox"/>	Transcripts – Undergraduate For marks completed up to August 29, 2011	<input type="checkbox"/>
<input type="checkbox"/> (if applicable)	Transcripts - Graduate For marks completed up to August 29, 2011	<input type="checkbox"/>
<input type="checkbox"/> (if applicable & only 1)	Proof of Citizenship – Permanent Resident	<input type="checkbox"/>
	Proof of Citizenship – Student Visa	
	Proof of Citizenship – Protected Person	
<input type="checkbox"/> (AS applicable)	Master's Statement of Interest	<input type="checkbox"/>
	Doctorate Plan of Study	
Optional Items:		
<input type="checkbox"/>	List of Significant Academic Accomplishments	<input type="checkbox"/>
<input type="checkbox"/>	List of Other Scholarships and Awards	<input type="checkbox"/>
<input type="checkbox"/>	List of Publications and Presentations	<input type="checkbox"/>
<input type="checkbox"/>	Change Form - Studies and Awards (Changes to proposed, current and previous studies and/or other awards after online application submitted)	<input type="checkbox"/>
Office Use Only:		
N/A	Grade Average (% or grade point average – 80/100 or 3.5/4.0)	/

Student Signature:
Date:
Dep't Signature Date:
 (if applicable)

GSO Signature:
Date:

					
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Personal Information (For Ministry Use Only - Will Not be Shared with OGS Selection Board or Selection Panels)

Basic Personal Identification

Social Insurance Number:



Date of birth:

Day Month Year

Gender:

Male

Female

First name:

Last name:

Permanent Canadian Address



Street name and number, rural route, or post office box:

Apartment:

City, town, or post office:

Province:

Postal Code:

Area code and telephone number:

Mailing Address as of May 2012 (University department address is not acceptable)

Is your mailing address the same as your permanent address?

Yes

No

If "Yes", go to "Other Personal Information" below. If "No", complete mailing address.

Street name and number, rural route, or post office box:

Apartment:

Street, rural route, or post office box:

City, town, or post office:

Province or State:

Region Code:

Postal Code or Zip Code:

Area code and telephone number:

Country:

Other Personal Information

Your citizenship status:

Canadian Citizen

Permanent Resident

Protected Person

Temporary resident visa - student study permit

If you selected Permanent Resident, Protected Person or Temporary resident visa - student study permit, please provide the date your residency status was received:

Date residency status received:

Day Month Year



Ontario Education Number (OEN) if assigned to you by the Ministry of Education:



Correspondence Options

In which language do you prefer to receive correspondence?

English

French

Do you wish to receive e-mails about the status of your application?

Yes

No

E-mail address:

Sharing Your Information



If you wish to have information from your OGS file released by the ministry to anyone other than yourself (e.g., your parent(s) or spouse), you must complete this section. This consent is valid during your 2012-2013 academic year only.

First name:

Last name:

Date of birth:

Day Month Year

First name:

Last name:

Date of birth:

Day Month Year



Student Name: _____

Student Number: _____

Current Status

1. Are you currently enrolled at a postsecondary school?

Yes No *If "No", go to question 3b*

2. Are you currently enrolled at a postsecondary school in Ontario?

Yes *If "Yes", go to question 3a* No *If "No", go to "Proposed Studies" below.*

3.a) What type of school are you attending (if you are currently enrolled at a postsecondary institution)?

- University
- College in which my program leads to an undergraduate degree
- Other

3.b) Did you or will you graduate from an Ontario university between November 16, 2010 and November 16, 2011?

Yes No

If yes, please enter university name :

Proposed Studies

School you plan to attend:

Division:

Discipline code:

Discipline name:

Proposed level of study for 2012-2013: Master's - year 1 Master's - year 2 Doctorate

Date you expect to receive your degree for your proposed studies (This date cannot be prior to December 2011):

Month

Year

Number of terms:

1 term

2 terms

3 terms

Note: you are not eligible if you are in a 1 term program.

Date you expect to begin your proposed studies:

May 2012

September 2012

January 2013

Current Studies

Postsecondary school are you currently attending:

Student number at this school:

Division:

Discipline code:

Discipline name:

Level of your current studies:

- Doctorate
- Master's
- Bachelor's
- Certificate/Diploma/Other/None

Student Name:

Student Number:

Notice, Consents, Declaration, and Signature of Applicant

Collection and Use of Personal Information

Your personal information, including your Social Insurance Number (SIN), provided on this application form, in the required supporting documentation, and in all other communications related to your application and award of an Ontario Graduate Scholarship (OGS), including previous applications and awards of OGS, will be used by the Ministry of Training, Colleges and Universities (ministry) to administer and finance the OGS program. The ministry may use contractors, auditors or other third party administrators for any of these activities. Pages 2 and 3 of this application form will be used by the OGS Selection Board to consider your OGS application and make its report to the Minister of Training, Colleges and Universities (Minister) with respect to the granting of the OGS and by a selection panel appointed by the OGS Selection Board to assess your application.

Administration includes: determining your eligibility for an OGS; verifying your application; verifying your OGS award; considering any requests for review; maintaining and auditing your file; collecting overpayments and repayments; enforcing the legislation set out below and your agreements with the ministry; public reporting on the administration and financing of the OGS program; planning, delivering, evaluating and monitoring the OGS program for quality and improvements in both content and delivery; conducting risk management, error management, audit and quality assessment activities; conducting inspections or investigations; and conducting policy analysis, evaluation, and research related to all aspects of the OGS program. Financing includes: planning, arranging or providing funding of the OGS program.

The ministry administers the OGS program under the authority of the Ministry of Training, Colleges and Universities Act, R.S.O. 1990, c. M.19, as amended; Reg. 772, R.R.O. 1990 as amended; ss. 14(3) and 42.1 of O. Reg. 268/01, as amended; s. 266.3(4) of the Education Act, R.S.O. 1990, c. E.2, as amended and s. 10.1 of the Financial Administration Act, R.S.O. 1990, c. F. 12, as amended. If you have any questions about the collection or use of this information, contact the Director, Student Financial Assistance Branch, Ministry of Training, Colleges and Universities, PO Box 4500, 189 Red River Road, 4th Floor, Thunder Bay, ON P7B 6G9.

Applicant's Consent to the Indirect Collection and Disclosure of Personal Information

- I agree that the ministry can, without limitation, collect, use and disclose personal information about me that is relevant to the administration and financing of OGS with: my eligible Ontario institution and its authorized financial administration agents and auditors; my academic references; OGS Selection Board and my selection panel; SSHRC; NSERC; CIHR; bodies identified on this application form and other bodies, including government bodies within and outside Canada that administer scholarships for graduate study or student loans; the ministry's contractors, auditors and third party administrators; Ministry of Government Services and collection agencies it operates or retains; and consumer reporting agencies.
- I agree that the OGS Selection Board can, without limitation collect, use and disclose personal information about me that is relevant to the consideration of my OGS application and its report to the Minister with respect to the granting of the OGS with: the ministry, my academic references and the selection panel it appoints to assess my application.

Applicant's Declaration

- I have given complete and true information on this application form and in the required supporting documentation.
- I understand that I am responsible for providing all required supporting documentation as indicated on my application or as directed by the ministry or my eligible Ontario institution in respect of my eligibility for an OGS.
- I understand that information I provide will be verified and audited and the ministry may also conduct inspections and investigations.
- I will keep a copy of my application and all required supporting documentation in the event that I am required to produce this information for audit, verification, inspection or investigation purposes.
- I will promptly notify the ministry in writing of any changes to the information that I have provided and of any changes to my eligibility for an OGS, including ceasing to be enrolled in an eligible program at an eligible Ontario institution; receiving a NSERC, SSHRC, CIHR award or any other awards in excess of \$10,000, including a OGSST award; becoming employed for more than an average of 10 hours per week; or doing anything that would entitle the Minister to refuse to grant me a certificate of approval for a student loan.
- I understand that any change to the information I provide and any change resulting from verification and audit will result in a reassessment.
- I understand that if my application is reassessed, it may affect my eligibility and the amount of my OGS and, if required by the Minister I will promptly repay all or part of my OGS.

I have read and understood this section, including the notice of collection, use, and disclosure of my personal information and my signature attests to my consent to the indirect collection, use and disclosure of my personal information and that my declaration is complete and true.

Signature of Applicant:

Date:

Applicant's Consent and Signature to the Release of Personal Information (OPTIONAL)

(For Ministry Use Only - Will not be Shared with OGS Selection Board or Selection Panels)

I hereby authorize the ministry to release to the person(s) named on my 2012-2013 OGS application any information contained in my OGS file for the 2012-2013 academic year and all prior academic years. This consent is valid during my 2012-2013 academic year only. I may withdraw this consent prior to the end of the 2012-2013 academic year by writing to the Director, Student Financial Assistance Branch, Ministry of Training, Colleges and Universities, PO Box 4500, Thunder Bay, ON P7B 6G9.

Signature of Applicant:

Date:



Student must complete "Student Information" and "Submission Information" sections and forward this report to the professor to complete. The professor is responsible for completing "Academic Assessment" and "Professor Information" sections and signing this report. It is important that it is returned to the student by the deadline date indicated so that the student may ensure that his or her OGS Application Package is complete and submitted by the application deadline. Failure to do so will disqualify the student from the competition. The use of this form is mandatory under the Freedom of Information and Protection of Privacy Act.

Student Information

Student Name:	
Student #:	
University attending or planning to attend:	
Department:	
Discipline:	

Submission Information

Deadline date:	
Send to:	

Academic Assessment

Carefully mark the category that best describes the student's academic performance in relation to all students at a similar stage that you have previously evaluated. Please apply the strictest interpretations of the rankings indicated below. For example, the ranking of a student in the top category is expected to occur infrequently. In addition, if you wish to elaborate on the assessment or provide other relevant comments please complete and sign the attached form.

	Top 2%	Top 5%	Top 10%	Top 20%	Top 50%	Lower 50%	Unable to evaluate
Background preparation							
Originality							
Present ability at research							
Research potential							
Industriousness							
Judgement							
Oral and written skills							
Overall ability							

Professor Information

I knew the student in my capacity as:

During the following period:

_____	_____	to	_____
Name:	Title:	University:	Department:
_____	_____	_____	_____
Signature:	Date:		



Additional Information from Professor


Student Information

Student Name:	
Student #:	
University attending or planning to attend:	
Department:	
Discipline:	



Signature:

Date:

|  _____ | _____ |

Under the Freedom of Information and Protection of Privacy Act, the ministry has responsibilities respecting the proper collection, retention, use, and disclosure of personal information. The personal information on this form is collected under the Ministry of Colleges and Universities Act, R.S.O. 1990, c. M.19, and Regulation 773 and is used by the ministry to administer all aspects of the Ontario Graduate Scholarship Program. Because this report contains personal information about the applicant, the information may not only be used by the ministry but may also be disclosed to the applicant upon request. Questions about this collection should be addressed to the Director, Student Financial Assistance Branch, Ministry of Training, Colleges and Universities, PO Box 4500, Thunder Bay ON P7B 6G9.



Student must complete "Student Information" and "Submission Information" sections and forward this report to the professor to complete. The professor is responsible for completing "Academic Assessment" and "Professor Information" sections and signing this report. It is important that it is returned to the student by the deadline date indicated so that the student may ensure that his or her OGS Application Package is complete and submitted by the application deadline. Failure to do so will disqualify the student from the competition. The use of this form is mandatory under the Freedom of Information and Protection of Privacy Act.

Student Information

Student Name:	
Student #:	
University attending or planning to attend:	
Department:	
Discipline:	

Submission Information

Deadline date:	
Send to:	

Academic Assessment

Carefully mark the category that best describes the student's academic performance in relation to all students at a similar stage that you have previously evaluated. Please apply the strictest interpretations of the rankings indicated below. For example, the ranking of a student in the top category is expected to occur infrequently. In addition, if you wish to elaborate on the assessment or provide other relevant comments please complete and sign the attached form.

	Top 2%	Top 5%	Top 10%	Top 20%	Top 50%	Lower 50%	Unable to evaluate
Background preparation							
Originality							
Present ability at research							
Research potential							
Industriousness							
Judgement							
Oral and written skills							
Overall ability							

Professor Information

I knew the student in my capacity as:

During the following period:

_____	_____	to	_____
	Month/Year		Month/Year

Name: _____	Title: _____	University: _____	Department: _____
_____	_____	_____	_____

Signature: _____	Date: _____
_____	_____

Additional Information from Professor

Student Information

Student Name:	
Student #:	
University attending or planning to attend:	
Department:	
Discipline:	

Signature:

Date:

|_____||_____||

All University Transcripts

Most Recent First

(Do not include transcripts for studies in progress; ie. for student's who have just started at the University of Waterloo in September 2011. Transcripts are used to confirm previously completed courses only.)

Proof of Citizenship (If applicable)

Permanent Resident – either a copy of the PR card (front & back) or a copy of the Record of Landing

Protected Person – Protected Person Status Document

Temporary Resident Visa – copy of the student study permit

You must have obtained the above status no later than the OGS application deadline, October 19th, 2011 and the proof must be valid (not expired) in order to be considered for an OGS award.



Ontario

Ministry of Training,
Colleges and Universities
Student Financial Assistance Branch



**2012-2013 ONTARIO GRADUATE
SCHOLARSHIP PROGRAM**

Master's Statement of Interest

Mandatory if proposed studies is Master's. Must not contain more than 3,950 characters (with spaces). Do not include website links.

Name:

Student Number:



Ontario

Ministry of Training,
Colleges and Universities
Student Financial Assistance Branch



**2012-2013 ONTARIO GRADUATE
SCHOLARSHIP PROGRAM**

Doctorate Plan of Study

Mandatory if proposed studies is Doctorate. Must not contain more than 3,950 characters (with spaces). Do not include website links.

Name:

Student Number:



Ontario

Ministry of Training,
Colleges and Universities
Student Financial Assistance Branch



**2012-2013 ONTARIO GRADUATE
SCHOLARSHIP PROGRAM**

List of Significant Academic Accomplishments

Optional. Must not contain more than 3,950 characters (with spaces). Do not include website links.

Name:

Student Number:



Ontario

Ministry of Training,
Colleges and Universities
Student Financial Assistance Branch



**2012-2013 ONTARIO GRADUATE
SCHOLARSHIP PROGRAM**

List of Other Scholarships and Awards

Optional. Must not contain more than 3,950 characters (with spaces). Do not include website links.

Name:

Student Number:



Ontario

Ministry of Training,
Colleges and Universities
Student Financial Assistance Branch



**2012-2013 ONTARIO GRADUATE
SCHOLARSHIP PROGRAM**

List of Publications and Presentations

Optional. Must not contain more than 3,950 characters (with spaces). Do not include website links.

Name:

Student Number: