

Office of the MSc Program – HEC Montréal

Scholarship for data collection (M.Sc.)

GENERAL INFORMATION / APPLICANT

Last Name: _____

First Name: _____

Student ID: _____

Application date: _____

Legal Status: Canadian Citizen Permanent Resident International Student*

**International students must provide a copy of their study permit.*

MSc Specialisation (option): _____

Stream: _____

Actual GPA for MSc program: _____/4.3

Number of MSc credits earned: _____

Name of the research supervisor (or co-supervisors): _____

PROJECT INFORMATION - Thesis or supervised project (in a university context)

Title of the thesis or supervised project (in an academic context):

Specify the type of your supervised project: _____

Indicate where the data collection will take place: _____

Duration of data collection: _____

CONFIRMATION OF THE SUPERVISOR (or co-supervisors)

The supervisor (or co-supervisors) must confirm that the data collection is not funded.

☐ I (we) confirm that the data collection is not funded.

Supervisor signature

Date

Co-supervisor signature

Date

DOCUMENTS TO ENCLOSE

- ☐ Letter of application: Justify the importance of this data collection for the completion of your thesis or supervised project (in a university context); explain where and how you will be collecting data and describe your objectives. You may also explain any situations that may have affected your progress in your program of study (max. 1 page)
- ☐ Timeline of steps to complete your data collection
- ☐ Budget for your data collection: must include costs (expenses) and possible or confirmed funding (funding sources)
- ☐ Your most recent transcript (HEC online version accepted)
- ☐ Your approved plan of study (thesis) or the approval form for your supervised project
- ☐ Study permit (for international students only).

DECLARATION OF THE STUDENT

I certify that the information provided therein is true and complete and I agree to give access to my personal and academic information to all members of the evaluation committee. I authorize the M.Sc. Office to verify the accuracy of all information regarding my application. In case some data is inaccurate, I understand that my application will be canceled without notice.

I agree that HEC Montréal and the Fondation HEC Montréal may publish my name and the amount of any scholarship I receive. I also agree that HEC Montréal and the Fondation HEC Montréal may take and publish my photo. Lastly, I agree, if applicable, that my name may be associated with the donor's name. I give all this consent voluntarily.

Signature: _____

Date: _____

SUBMISSION

SUBMIT YOUR APPLICATION IN A **SINGLE PDF FILE** BY EMAIL TO SAE.CANDIDATURES@HEC.CA.