



UNIVERSITY OF  
CALGARY

## SCHOLARSHIP REFERENCE FORM 2

### Must be completed by APPLICANT

Applicant's Family Name

Applicant's First Name(s)

UCID Number

Applicant's Program

Applicant's Degree

*NOTE: Students who submit a formal request for access may be given copies of their reference forms.*

### Must be completed by REFEREE

**\*\*Adobe Acrobat Reader** is required to open and complete this form. [Download Adobe Reader](#). Opening this form in 'Preview' or any software other than Adobe Reader will corrupt the file. \*\*

Send the scholarship reference form by e-mail to the Graduate Scholarship Office [gsaward@ucalgary.ca](mailto:gsaward@ucalgary.ca) from an institutional/business e-mail address

Name of Referee

Institution/ Position and Department

Institutional or Business E-mail

Institutional or Business Address

Institutional or Business Telephone

I have known the applicant in my capacity as:

I have known the applicant for:

I have read the applicant's research proposal    No       Yes



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## **SCHOLARSHIP REFERENCE FORM 2**

Academic excellence - Rating

Academic excellence as demonstrated by past academic results, transcripts, awards and distinctions.

Research Excellence – Rating:

Research potential as demonstrated by the applicant's research history, his/her interest in discovery, the proposed research, its potential contribution to the advancement of knowledge in the field, and any anticipated outcomes.



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## SCHOLARSHIP REFERENCE FORM 2

### Personal characteristics and interpersonal skills – Rating

Personal characteristics and interpersonal skills as demonstrated by the applicant's communication skills, past professional and relevant extracurricular interactions and collaborations.

Name of referee (typed or electronic signature)	Date
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*This information is collected under the authority of the Freedom of Information and Protection of Privacy Act, the Taxation Act (Canada) and the Statistics Act (Canada) to determine eligibility for graduate scholarships, awards and bursaries and will form part of the student record at the University of Calgary. Please direct any questions about the use of this information to the FOIP Advisor, Faculty of Graduate Studies, University of Calgary, Calgary, Alberta, Canada T2N 1N4. Telephone: (403) 220-4938.*