

ALL CORRESPONDENC	E WITH CARLETON STU	DENTS WILL BE TO Y	OUR CARLETON EMAIL ADDRESS
Carleton Student ID	(if applicable)		
PERSONAL INFORM	ATION		
Last Name:			
First Name:			
Email Address			
Citizenship status:			
Canadian Citizen Please provide a copy of	Permanent Resident	-	Temporary Resident visa/study permit visa and/or study permit
CURRENT STATUS			
Are you currently regis	tered at Carleton Univer	rsity? Yes	No
If no, what school are	you currently attending	?	
Program of Study:			
Level of Current Studie	25		
Doctorate	Masters	Bachelors	Certificate/Diploma/Other
PROPOSED STUDIES	(if your proposed studies	is the same as current	;, just indicate "same" in Program)
Program of Study:			
Proposed Level of Stuc	ly for 2025-2026:	Master	Doctorate
official program time t	term of registration in y o completion annot be prior to Fall 20		
	ou expect to receive you mot be prior to Decemb		



Ontario Graduate Scholarship Application Form

Student Name	Student ID (If Applicable)	

PREVIOUS STUDIES (do not include your current studies)

Please provide information on all your previous studies. Start with your most recent studies first. Include both studies in Canada as well as outside Canada. Applicants must provide up-to-date official transcripts of all undergraduate and graduate studies, including transcripts for the fall semester of the year of application.

Institution	Dates of Study From - To	Name of Program	Level of Study*	Degree Received	Date Degree was Received
			B, M, D, C	Yes or No	
				YES	
				NO	
				YES	
				NO	
				YES	
				NO	

* B = Bachelor's, M = Master, D = Doctoral, C = Certificate/Diploma

PREVIOUS OGS AWARDS, OTHER AWARDS AND FINANCIAL AID

One of the eligibility requirements for OGS is that you must not have exceeded the lifetime maximum of 6 years of government-funded student awards. Please indicate if you have ever been in receipt of any of the following awards:

AWARD NAME		s or No	Number of years you received this award
Social Sciences and Humanities Research Council (SSHRC)	YES	NO	
Natural Sciences and Engineering Research Council (NSERC)		NO	
Canadian Institutes of Health Research (CIHR)	YES	NO	
Ontario Graduate Scholarship (OGS)	YES	NO	
Queen Elizabeth II Graduate Scholarship in Science and Technology	YES	NO	
Ontario Trillium Scholarships	YES	NO	
Vanier Canada Graduate Scholarship	YES	NO	
OSAP (if yes please, provide Social Insurance Number)	YES	NO	Social Insurance Number



Ontario Graduate Scholarship Application Form

Student Name _____

Student ID (If Applicable) _____

Notice, Consents, Declaration and Signature of Applicant

Your personal information provided on this application form, in the required 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 Carleton University to administer and finance the program.

Under the Freedom of Information and Protection of Privacy Act, Carleton University has responsibilities respecting the proper collection, retention, use, and disclosure of personal information. The personal information on this form is collected in accordance with Section's 38(2) and 41(1) of the Freedom of Information and Protection of Privacy Act (FIPPA), R.S.O. 1990, c. F.31 as amended. The information provided will not be used for any purposes other than those stated upon this form unless the applicant provides expressed consent. Should you have any questions concerning your personal information, please contact the Faculty of Graduate and Postdoctoral Affairs (512 Tory Building, 613-520-2525). Carleton University is fully compliant with FIPPA and endeavours at all times to treat your personal information in accordance with this law.

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; 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.

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

I agree that Carleton University may, without limitation, collect, use and disclose personal information about me that is relevant to the administration and financing of OGS with: its authorized financial administration agents and auditors; my academic references; 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 Carleton University may, 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 Carleton University 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 and 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 Carleton University 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, Vanier, Trillium or QE II or if I become employed for more than an average of 10 hours per week.
- 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. I understand that any fraudulent or misleading statement may result in proceedings for academic misconduct.

Signature of Applicant: _____ Date: DD/MM/YY

If you are presently not a Carleton student do you agree to the sharing of your information for the purposes of Yes '''' recruitment? No