



ONTARIO GRADUATE SCHOLARSHIP PROGRAM

Notice of Acceptance

Student Name Student Number					
In order to receive the scholarsh	ip, this form mu	st be returned to	the Faculty of Gra	duate and Postdoctoral Affairs	no later than 2
weeks from the date of offer, or	this offer could	be withdrawn .	Please return this	form via email to	
Jenna.McConnell@carleton.ca.	The OGS Schola	rship is valued at	\$5000 per term.		
Acceptance: I accept the offer of the 2022-2023 Ontario Graduate Scholarship					
Acceptance:	•		•		
Refusal:	I do not acc	ept the 2022-20	023 Ontario Grad	uate Scholarship	
Number of consecutive terms:	Start Date:			Degree Expected]
2 terms 3 terms	May 2022	September 2022	January 2023	Master's Doctorate	
					1
Name of Department or Discipline:					
Verification by Institution					
Before receiving the scholarship, I understand that Carleton must verify that:					
I am eligible for the award and any f	uture instalments.				
I am enrolled in an eligible program	as a full-time grad	uate student for tw	o or three consecutiv	ve terms. One term awards are not	permitted. If my
status as a full-time graduate studer	nt changes, I must	notify FGPA immed	liately and I may be re	equired to repay all or part of the a	ward.
I am a Canadian citizen, permanent	resident, protected	d person or I have a	temporary resident	visa as a member of the student cla	iss under the
Immigration and Refugee Protection	ı Act (Canada).				
Applicants Verification of Eligibi	lity				
To the best of my knowledge, I have not done anything that would entitle the Ministry of Training, Colleges and Universities to refuse to grant me a					
certificate of approval for a student loan.					
I understand that this Notice of Acce	eptance must be co	ompleted and subm	itted to FGPA,via ema	ail Jenna.Mcconnell@carleton.ca, w	vithin 2 weeks
from the date of offer or the offer co	ould be withdrawn.				
All information I provided in connection with my OGS application is complete and true and I have notified FGPA of any changes that have occurred					
up to the date I submit this Notice o	f Acceptance.				
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 authorize	ed financial adminis	tration agents and au	uditors; my academic references; SS	SHRC; NSERC;
CIHR; bodies identified on my applic	ation form and oth	ner bodies, includin	g government bodies	s within and outside Canada that ac	lminister
scholarships for graduate study or st	tudent loans; the n	ninistry's contracto	rs, auditors and third	party administrators; Ministry of G	iovernment
Services and collection agencies it o	perates or retains;	and consumer repo	orting agencies.		
Student's Signature:				Date:	