

## APPLICATION FORM (please complete all fields using Adobe Acrobat)

Name \_\_\_\_\_ Institution \_\_\_\_\_

Current Address \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ e-mail \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_ Permanent Telephone \_\_\_\_\_

Academic Program \_\_\_\_\_ Current Year \_\_\_\_\_

Select one:  Canadian citizen  Permanent Resident  Other: \_\_\_\_\_

Previous Work Experience (Science-related; give year, position, supervisor, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Career Plans \_\_\_\_\_

Other Relevant Information \_\_\_\_\_  
\_\_\_\_\_

Preferred ICE supervisor 1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Are you willing to be placed at **any** of the participating institutions? Yes  No

Please submit this completed application along with a copy of your transcript (unofficial) to your University ICE representative by Friday Nov 5th, 2021