



Request for a Change of Program of Study or Research — Form 5

Part I - To be completed by award holder. Return this form to SSHRC.					
Award holder family name		Award holder given name		Initials	
Full name of university					
Department/Division name			Award number		
Award holder's mailing address _____ _____		Primary telephone number			
		Country code	Area code	Number	Extension
Secondary telephone number		Country code	Area code	Number	Extension
		Award holder's primary E-mail			Fax
I hereby request permission to change my program of study or research project, effective _____ (dd/mm/yy)					
I am attaching a one-page outline of my new proposal.					
Signature of award holder			Date		
Part II - To be completed by the award holder and supervisor or Dean of Graduate Studies					
For doctoral fellowship holders only:					
<input type="checkbox"/> I have not taken up my award and have not yet commenced my doctoral program.					
<input type="checkbox"/> I have taken up my award and have already commenced my doctoral program.					
I support the change in the award holder's program of study.					
Name of Dean of Graduate Studies/designated person (print)		Signature		Date	
University		Primary telephone number			
Primary E-mail		Country code	Area code	Number	Extension
For postdoctoral fellowship holders only:					
<input type="checkbox"/> I have not taken up my award.					
<input type="checkbox"/> I have taken up my award.					
I support the change in the award holder's research project.					
Name of supervisor/designated person (print)		Signature		Date	
University		Primary telephone number			
Primary E-mail		Country code	Area code	Number	Extension