



FORM 101
Application for a Grant
PART I

Institutional Identifier		Date	
System-ID (for NSERC use only)			
Family name of applicant	Given name	Initial(s) of all given names	Personal identification no. (PIN)
Institution that will administer the grant		Language of application English French	Time (in hours per month) to be devoted to the proposed research / activity
Type of grant applied for		For Strategic Projects, indicate the Target Area and the Research Topic; for Strategic Networks and Strategic Workshops indicate the Target Area.	

Title of proposal

Provide a maximum of 10 key words that describe this Chair. Use commas to separate them.

Research subject code(s) Primary Secondary	Area of application code(s) Primary Secondary
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CERTIFICATION/REQUIREMENTS

If this proposal involves any of the following, check the box(es) and submit the protocol to the university or college's certification committee.

Research involving : Humans Human pluripotent stem cells Animals Biohazards

Indicate if the proposed research takes place outdoors and if you answered YES to a), b) or c) - Appendix A must be completed

NO YES

TOTAL AMOUNT REQUESTED FROM NSERC

Year 1	Year 2	Year 3	Year 4	Year 5
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SIGNATURES (Refer to instructions "What do signatures mean?")

It is agreed that the general conditions governing grants as outlined in the NSERC *Program Guide for Professors* apply to any grant made pursuant to this application and are hereby accepted by the applicant and the applicant's employing institution.

_____ Applicant Applicant's department, institution, tel. and fax nos., and e-mail _____	_____ Head of department _____ Dean of faculty _____ President of institution (or representative)
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