



SEND A COPY TO THE AUTHORIZED INSTITUTIONAL OFFICE RESPONSIBLE FOR ADMINISTERING THE INSTALMENT

Request for First Instalment or Reinstatement of Award Paid by Canadian Institution

Part 1: AWARD HOLDER INFORMATION		
Family name	Given name and initial(s)	
Email address	Telephone number	
Mailing address	T4A mailing address (if different)	
Part 2: AWARD AND INSTITUTION INFORMATION		
<input type="checkbox"/> CIHR <input type="checkbox"/> NSERC <input type="checkbox"/> SSHRC		
Type of award	Application number	Committee number (NSERC only)
Faculty/department	Institution	Research institution (CIHR only)
Part 3: INSTALMENT/REINSTATEMENT		
<input type="checkbox"/> First instalment (NSERC and SSHRC only) <input type="checkbox"/> I have provided a copy of my Notification of Decision to the awards administration officer at the host institution Award start date: _____ <div style="text-align: right; margin-right: 50px;">mm/dd/yyyy</div>	<input type="checkbox"/> Reinstatement of award <input type="checkbox"/> Documents attached, if required (CIHR only) Award reinstatement date: _____ <div style="text-align: right; margin-right: 50px;">mm/dd/yyyy</div>	
Signature of award holder: _____ Date: _____ (mm/dd/yyyy)		
Part 4: CONFIRMATION OF STATUS		
To be completed by an awards administration officer at the host institution		
<input type="checkbox"/> Instalment: I confirm the award holder is/will be registered as a full-time student or engaged in full-time research. <input type="checkbox"/> Reinstatement: I confirm the award holder has returned from an approved leave of absence and will be/is resuming studies/research for which funds were awarded.		
Name of official (print): _____ Title: _____		
Signature of official: _____ Date: _____ (mm/dd/yyyy)		