

(Please type or print clearly using a black or dark blue pen. Do not use a pencil.)

A. APPLICANT INFORMATION				
Last Name	First Name	Middle Name	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss <input type="checkbox"/> Ms.
Mailing Address (Street, Rural Route, Post Office Box)			Apt. No.	
City, town		Province	Postal Code	
Area Code and Telephone No. ()	E-mail		Today's Date MM / DD / YY	
University	Program		Degree Sought	

B. ACADEMIC HISTORY		
Other Degrees		
	<u>University</u>	<u>Program / Majors</u>
		<u>Date Obtained</u>
1)		Month Year
2)		Month Year
3)		Month Year
Current Awards (if any)		
1)		
2)		
3)		
4)		
Past Awards (if any)		
1)		
2)		
3)		
4)		

C. PROJECT INFORMATION

Provide an outline of your Research / Thesis Proposal. (max. 500 words)

C. PROJECT INFORMATION

Provide your expected timeline for completion.

Provide a statement of how the output of your research topic is expected to **directly** benefit a community or society as a whole.
(max. 250 words)

D. CONTACT INFORMATION FOR REFERENCES				
Two (2) references are required. One of the references must be your thesis / project supervisor.				
Last Name	First Name	Middle Name	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr.
Mailing Address (Street, Rural Route, Post Office Box, Apt. No.)				
City, town	Province	Postal Code		
Area Code and Telephone No. ()	E-mail	Thesis / Project Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Last Name	First Name	Middle Name	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Dr.
Mailing Address (Street, Rural Route, Post Office Box, Apt. No.)				
City, town	Province	Postal Code		
Area Code and Telephone No. ()	E-mail	Thesis / Project Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No		

You **do not** have to submit letters of references.

For more information, please visit the Silverhill Institute web site at www.silverhillinstitute.com.

If you have any questions, e-mail Dr. Peter Homenuck, Board Chair at peter@silverhillinstitute.com

Send 4 copies of your application by mail, courier or hand delivered ONLY to:

Silverhill Institute for Environmental Research and Conservation

c/o DPRA Canada

60 Adelaide Street East, Suite 501

Toronto, ON Canada

M5C 3E4

Attn: Dr. Peter Homenuck, RPP