

**UBC School of Human Kinetics
Graduate Programs**

FACULTY CONTACT FORM

This form has been developed in order to facilitate communication between you and your potential supervisor. Please use [Adobe Reader 7](#) (or later) so that your completed form can be saved and then emailed to your potential supervisor.

1. General Information

Surname:		Given:	
Email:		Phone:	
Proposed start (mm/yyyy):		Proposed Degree:	MA <input type="checkbox"/> MSc <input type="checkbox"/> MHK <input type="checkbox"/> PhD <input type="checkbox"/>

Please list, in rank order, the names of proposed supervisors whose research most closely reflects your interests:

(a)

If my first choice is unavailable please forward this information to:

(b)

If my second choice is unavailable please forward this information to:

(c)

2. Academic History (undergraduate and graduate degrees)

Degree	Institution	Supervisor	Year Completed

GPA during final 2 years of FULL TIME study: _____

3. Research Experience and Field of Study

Provide a brief statement outlining why you would like to undertake research with this proposed supervisor(s):

Add additional pages if necessary

4. Financial Support

If you have applied for or been awarded scholarship funding (CIHR, NSERC, SSHRC, etc) please provide...

Funding Agency: _____ \$ _____ Date _____ (mm/yyyy)

5. Other

Please provide any other relevant information you think appropriate (publications, research experience, appropriate courses taken, etc.):

Add additional pages if necessary