

Date received (office use only)



Scholars in Residence Application Form

This form may be completed using Adobe Acrobat or Adobe Reader.

Personal Information	
Name:	Street address:
Home tel:	City, Prov:
Cell:	Country:
Email:	

Research Program
Department:
Highest degree and institution:
Length of tenure at Dawson:
Research interest keywords:

I would like access to the following services (please check all that apply):

Dawson staff ID card

Access to Dawson's library and inter-library loans

A BCI (formerly CREPUQ) library card

Dawson email address and access to Webmail

A self-financed budget code for use at the Dawson Print Shop

Signature
By signing this form, I acknowledge that I have read, understood and agree to comply with Dawson College's <i>Policy on Integrity and Scholarship in Research</i> . I also agree to recognize Dawson College as an affiliated institution in any publications or works stemming from my research conducted while I remain a Scholar in Residence.
Signature
Date

Please submit this form, a detailed and current CV and your research statement as PDF and/or Word documents via email to research@dawsoncollege.qc.ca or to the Research Office in 4B.3A. If you have any questions, please contact Kaila Folinsbee at ext. 1374 or research@dawsoncollege.qc.ca.