**ACT Student Bursaries Support Form  
Due date: February 1, 2018**

**Please email this form to** [application@actproject.ca](mailto:application@actproject.ca)**, along with a confidential letter of reference.**

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| **Student Information**  Name:  Level (MA, PhD):  Year in progress:  University: |
| **Sponsoring ACT Co-Applicant or Collaborator Information**  Name:  Role in ACT (Co-applicant, collaborator):  University:  ACT partner institution (may be the same as university): |
| **Sponsoring ACT Co-Applicant or Collaborator’s Signature**  \*All boxes need to be checked or otherwise marked for the application to be considered. Please sign by typing your name or include a digital signature   * I have read and I understand the guidelines pertaining to the ACT bursaries (document titled “ACT Student Bursaries” * I have read the student’s application form (document titled “ACT Student Bursaries Application Form” * Should the student’s application be successful, I will work with the ACT team to facilitate a transfer of funds to my institution, and then will use these funds to provide a bursary to the student. * I support the student’s application and recommend that ACT fund it.   Date:  Signature: |