

APPLICATION FORM - Fisher Fund for Neotropical Conservation

INCOMPLETE OR LATE APPLICATIONS WILL NOT BE ACCEPTED

DEADLINE: August 1, November 1 and April 15

VALUE: Normal maximum of \$3000

Submit complete applications to:
Student and Alumni Resource Centre
Faculty of Environmental Studies
York University
Room 129 HNES Building

PURPOSE This award is available to enable students to undertake field research primarily in the Las Nubes area of Costa Rica, or other areas of Costa Rica with similar issues in Neotropical conservation. **ELIGIBILITY:** The award is open to senior undergraduate students in the Faculty of Environmental Studies who are pursuing an Honours degree, Masters in Environmental Studies students (who must apply prior to their fifth term of study), and doctoral students in FES (who may apply at any time during their program). **CRITERIA:** Students must submit a research proposal that addresses a major theme in Neotropical conservation in Costa Rica, such as biodiversity measurement; monitoring and protection; protected area management; biological corridors; sustainable agriculture; and rural sustainability. Research must be field-based and interdisciplinary. Students must also submit a sealed letter of recommendation from their supervisor. Masters students must submit the abstract for their Area of Concentration. **CONTACT:** Student Awards, Student and Alumni Resource Centre, FES; HNES 129A Awards adjudication will be done by the Las Nubes Program Committee.

Protection of Privacy:

- Personal information in connection with this application is collected under the authority of the Freedom of Information and Protection of Privacy Act and the York University Act, 1965.
- Once an award has been granted, York University may disclose certain information to the donor of this award, provincial funding and/or York University academic departments/Faculties and Colleges.
- If you win a scholarship, your name and photography may be used for promotional purposes.
- If you have any questions about the collection of this information by York University, please contact: Information and Privacy Coordinator, York University, Ross N926, 4700 Keele Street, Toronto, ON M3J 1P3, 416-736-2100 ext. 20359

Mr /Ms /Miss _____
(circle one) Surname First Name

Student Number _____ Social Insurance Number _____

Address _____
Number Street Apartment
City/Town Province Postal Code (must be completed)

Telephone () _____ E-mail _____

Marital Status: Married Single Common-Law Number of Dependents & their ages _____

Do you reside with your parent(s)? Yes No

Faculty _____ Area of Concentration _____

Have you applied for OSAP? Yes No

If not, please explain why _____

Please check the ONE statement that best describes your current situation:

- You have lived in Ontario for at least 12 months in a row up to the beginning of your full-time or part-time postsecondary studies.
- Your spouse has lived in Ontario for at least 12 months in a row up to the beginning of the current study period and your spouse was not enrolled in full-time postsecondary studies during this 12 month period.
- Your parent(s), step-parent(s), legal guardian(s), or official sponsor(s) have lived in Ontario for at least 12 months in a row up to the beginning of your current study period.
- None of the above. Please explain: _____

WRITTEN STATEMENT

If there are any extenuating circumstances which have affected your ability to fund your expenses, please provide a brief explanation. Attach supporting documentation where possible (e.g. doctor's note).

Should you be selected to receive this award, do you agree to allow your name, address and biographical data to be released to the donor and to be used in any publication associated with this award? Yes No

I have read and agree to the following:

- The information provided on this application is complete and accurate.
- That all information provided in connection with this application is subject to verification by the University. I will supply supporting documentation to York University to verify my eligibility upon request.
- That any funds I receive will be applied to my student account at York.

SIGNATURE

DATE