

SUPERVISOR'S FINANCIAL COMMITMENT FORM

I, the undersigned, commit, if my student _____ obtain a scholarship from the CHU Sainte-Justine Foundation, to pay the required contribution from the Research Supervisor of \$8 500 (2nd cycle), \$10 000 (3rd cycle), \$18 750 (postdoctorate) or \$2 500 (MD/MSc or MD/PhD) for the entire duration of the award.

To this end, I authorize the Research Center to deduct from my budget code _____ the sum mentioned above according to the cycle of studies of my student.

The minimum amounts are established according to the amounts of the CHU Sainte-Justine Foundation grant, which are set for the year 2018-2019 to :

Level	Amount of the CHU Sainte-Justine Foundation Scholarship	Minimum contribution of the research director
Masters	8 500\$	8 500\$
Doctorate	10 000\$	10 000\$
Postdoctorate	18 750\$	18 750\$
MSc/PhD/MD	2 500\$	2 500\$

Supervisor's signature _____ Date : _____

For MD/MSc or MD/PhD candidate only :

Signature of the program director : _____ Date : _____