**ALBERTA GAMBLING RESEARCH INSTITUTE   
SCHOLARSHIP APPLICATION FORM FOR NEW APPLICANTS**  
  
2500 University Dr NW, Calgary, AB T2N 1N4  
Phone: 403-220-3062; email: [agri@ucalgary.ca](mailto:agri@ucalgary.ca)  
  
**DEADLINE FOR RECEIPT OF ALL FALL 2025/WINTER 2026 SCHOLARSHIP APPLICATIONS:**

**Monday, May 12, 2025, by 4:00 pm (MDT)**

**SECTION 1: PERSONAL DATA (for AGRI use only)**

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| **NAME:** [Lastname, Firstname, Middle Initial(s)]  Click here to enter text. |
| **BIRTHDATE:** [Year / Month /Day]  Click here to enter text. |
| **GENDER:**  Choose an item. |
| **CITIZENSHIP:**  Click here to enter text. |
| **IMMIGRATION STATUS IN CANADA:**  Choose an item. |
| **CANADIAN SOCIAL INSURANCE NUMBER:**  Click here to enter text. |
| **COMPLETE MAILING ADDRESS:**  Click here to enter text. |
| **TELEPHONE:**  Click here to enter text. |
| **FAX:**  Click here to enter text. |
| **E-MAIL:**  Click here to enter text. |

**SECTION 2: SIGNATURES**

The undersigned agree to, and accept, the general conditions governing any award made pursuant to the sponsorship of this application as set out in the AGRI Scholarship Guidelines.

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| **SINGNATURE OF:** | **PRINTED NAME:** | **DATE:** |
| [Candidate] |  |  |
| [Proposed Supervisor/Co-Supervisor] |  |  |

**A. APPLICANT NAME**

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| **NAME:** [Lastname, Firstname, Middle Initial(s)]  Click here to enter text. |

**B. LOCATION OF PROPOSED RESEARCH TRAINING**

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| **PROPOSED SUPERVISOR:** [Lastname, Firstname, Middle Initial(s)]  Click here to enter text. |
| **COMPLETE MAILING ADDRESS:**  Click here to enter text. |
| **TELEPHONE:**  Click here to enter text. |
| **FAX:**  Click here to enter text. |
| **E-MAIL:**  Click here to enter text. |

**C. PROGRAM**

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| 1. Indicate the graduate program and department in which you will register or are currently registered:   **PROGRAM:**  Master’s  Ph.D.   **DEPARTMENT:** Click here to enter text.  2. Anticipated start and completion dates of program:  Start Date: Click here to enter a date. Completion Date: Click here to enter a date.    3. Proposed starting date for award: Click here to enter a date. |

**D. OTHER INFORMATION**

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| 1. Category of scholarship applied for (check one): (See Guidelines to determine appropriate category)     Master’s  Ph.D.   2. Does your project involve: Use of Animals  YES  NO  Human Subjects  YES  NO  Biohazards  YES  NO  Other Authorizations  YES  NO  (e.g., Data Access)  3. Have you applied, or intend to apply, to another granting agency for a similar award?    YES  NO  If yes, please identify agency: Click here to enter text.  If yes, please indicate amount: Click here to enter text. |

**A1 – ACADEMIC RECORD  
Section A: To be completed by applicant**

**CANDIDATE’S CURRENT AND COMPLETED UNIVERSITY PROGRAMS**  
Append all university level transcripts to this application.

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| --- | --- | --- | --- |
| **Degree/Diploma/ Specialization/Faculty** | **University/Institution/Country** | **Dates of Enrollment  FROM (MM/YYYY) TO (MM/YYYY)** | |
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**UNIVERSITY ACADEMIC ACHIEVEMENTS**   
(Prizes, Honors, Awards) (Use additional pages if necessary)

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| --- | --- | --- |
| **Prizes/Honors/Awards** | **Awarded By** | **Year Won/Held** |
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**ACADEMIC INTERRUPTION**If there has been an interruption in your academic career, please provide an explanation indicating the period and reasons for the interruption. **(Maximum 75 words.)**

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| Click here to enter text. |

**A2 – RESEARCH EXPERIENCE**

**RELEVANT RESEARCH AND WORK EXPERIENCE**

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| **FROM  (MM/YYYY)** | **TO  (MM/YYYY)** | **Position** | **Institution/Company/ City/Country** | **Supervisor’s Name** |
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**CANDIDATE’S PUBLICATIONS/CONFERENCE PRESENTATIONS**Provide a list of your publications (or accepted for publication); conference presentations; abstracts. Use additional page, if needed.

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| Click here to enter text. |

**A3 – LETTERS OF ACADEMIC REFERENCE/SUPPORT**

**LETTERS OF REFERENCE**Identify the two individuals who have been asked to submit a letter of reference on your behalf. The proposed supervisor may be one of them.

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| --- | --- | --- |
| **Name** | **Institution/Organization** | **Email address** |
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Letters of reference should highlight the candidate’s strengths as they relate to suitability/experience in research (e.g., originality, technical ability, demonstrated skills, judgment, critical skills, etc.), as well as level of interest in the gambling field. Specific details are welcomed. If this is a grant renewal application, detail progress since last year.

Two signed confidential letters of reference to be sent directly from referees to: [gfwong@ucalgary.ca](mailto:gfwong@ucalgary.ca).

**B1 – SUPERVISOR’S RESEARCH BACKGROUND**(\* If co-supervisor, provide information for each supervisor)

**Section B: To be completed by supervisor(s)**

**SUPERVISOR’S POSTGRADUATE EXPERIENCE**

**A. Research** (List all research chronologically, starting with the most recent first, time frame, and institution; as well as experience in supervising post graduate students).

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| Click here to enter text. |

**B. Employment** (List chronologically all academic appointments held, including time frame and location).

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| Click here to enter text. |

**SUPERVISOR’S RESEARCH PUBLICATIONS**

On a separate page, list recent publications (within the past 5 years). Only list papers published or accepted for publication. Do not list Abstracts. **Underline** the names of **your** research trainees.

**C1 – ROLE OF TRAINEE AND LINKAGE TO SUPERVISOR’S RESEARCH  
Section C: To be completed collaboratively by applicant and supervisor(s)**

Give a brief description of the work carried out in the supervisor’s laboratory, or research group, indicating the relevance to the candidate’s proposed studies. **(Maximum 150 words.)**

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| Click here to enter text. |

Describe the role of the trainee in the proposed research project. **(Maximum 150 words.)**

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| Click here to enter text. |

**C2 – OVERALL IMPRESSION OF PROJECT**

**PROPOSED RESEARCH PROJECT**

Please provide a summary of the research project to be undertaken. **(Maximum 200 words.)**

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| Click here to enter text. |

Provide a title and description of your project – for use on Institute website and/or newsletter.

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| Click here to enter text. |

**C3 – AGRI STAKEHOLDER PRIORITY AREA**

Indicate the AGRI stakeholder priority(ies) your project falls under:

Public policy and responsible gambling strategy    
Indigenous/First Nations gambling including impact of trauma    
Longitudinal research    
Internet/remote gambling    
Treatment including the effect of stigma    
Socio-economic/Economics

**Application Submission Requirements:**

1. Completed Institute Scholarship Application Form for New Applicants
2. CV
3. University application status with available supporting documentation
4. Current official transcripts (issued after Jan 1, 2024; appended to application form)
5. Identification of academic supervisor(s) (permanent or interim)
6. Two confidential letters of academic reference, sent directly from referees to gfwong@ucalgary.ca.
7. Information on other scholarships in process or to be awarded for the same academic terms
8. Budget for the research allowance component of the award (if eligible)\*

\*Utilization of University agreements and associated fees for open access should be incorporated in budgets, if applicable.

EMAILED APPLICATION FORMS ARE NOT RECEIVED AS COMPLETE UNTIL ALL ACCOMPANYING DOCUMENTS ARE SENT DIRECTLY TO THE INSTITUTE AS PER GUIDELINE INSTRUCTIONS (official transcripts, signed reference letters sent directly by referees, any other supporting documents).