



## Saskatchewan Indigenous Mentorship Network Program Graduate Student Stipend Application Form

Please fill out this application form and send with application package to [sk.imnp@usask.ca](mailto:sk.imnp@usask.ca)

### Applicant Information

Name:	
Email:	
Phone:	
Address:	

Do you identify as Indigenous?	
Community affiliation:	

*Please include documentation verifying the above. See our website for what is considered acceptable proof of ancestry. <hyperlink>*

### Student Information

Current Degree Program:	
Year of Study:	
College:	
Department:	

University of Saskatchewan  
University of Regina  
First Nations University of Canada

*Please note this award is for graduate students registered full-time at a post-secondary institution in Saskatchewan.*

### Supervisor Information

Name:	
Department and College:	
Email:	
Phone:	



**Mentorship Information:**

Please explain how this stipend will support you in your mentorship goals and in completing your degree program?

How will this award support your development as an Indigenous health, wellness, and/or community-based researcher?



**Mentorship Information cont'd:**

Please list relevant community involvement