

GEORGE MANDLER RESEARCH FUND APPLICATION

Student Name:			
Student Name:Student Number:	Year of Study: _	Full-time (Y/N)	
St. George PSY Program: Major	Specialist	_ Research Specialist	
Email:			
Name of Research Supervisor:			
Describe how this funding will supp	ort vour research		
(Additional page can be attached, if req			
			_
	_		_
How will your research be supporte	d if you do not receive	e this fund?	
(1-2 sentences)			
A 1			
Academic History:	a history from ACODA	Lin DDE format and will amail it along	
with this application by the Sept		I in PDF format and will email it along to psy.undergrad@utoronto.ca.	