

Graduate CTPB Evaluation Form

This form is to be completed by a referee in support of applicants for CTPB Graduate Awards. Referees may either send the completed form by e-mail to the CTPB Coordinator at bionano.med@mcgill.ca or may mail a printed copy to the following address: CTPB Coordinator, McGill University, Bellini Building Room 453, 3649 Promenade Sir William Osler, Montreal, Quebec H3G 0B1. Please send e-mails using your institution-licensed e-mail address, or if sending completed forms by mail, sign across the flap of the envelope.

Family name of student: _____

Given name of student: _____

Name of referee	
Title of position	Type of organization
Organization	Department
E-mail address	Telephone number

I have known the applicant in my capacity as _____ for ___ years

Comment on the applicant's research ability/potential and on his/her communication, interpersonal and leadership abilities.

