

Graduate Scholarships in Environmental Sciences and Engineering

Reference Form

Please supply each of the two selected References with a reference form and the relevant section(s) of your application that you are asking each reference to validate. Ask each reference to complete the form and return it directly to the Society. Forms returned care of the applicant will not be accepted.

For Completion by the Applicant:

Applicant Name: _____
Reference Name: _____
Reference Telephone: _____
Reference E-mail: _____
Reference Address: _____
Address 2: _____

References:

The individual listed above has applied for a graduate scholarship with the Society of Contaminated Sites Approved Professionals (CSAP Society). Applicants must be engaged in a natural or applied science program leading to either a project (course-work masters) or thesis. They must demonstrate exceptional promise, academic excellence, leadership, and a strong commitment to contaminated sites, academic excellence, leadership, and a strong interest in contaminated sites work. Innovation and forward thinking will be considered for the Mike Macfarlane Memorial Scholarship. Applicants must (a) have a clearly defined project (b) show the relevance of the work to the process of remediation of contaminated sites.

The applicant has asked you to provide a reference to be considered by the Society when it reviews the candidate's application for scholarship. Because a portion of the Society's evaluation process is based upon the references, it is essential that you provide considered and candid responses to the questions below. Please answer questions to the best of your direct knowledge only.

If, for any reason, you feel that you cannot provide a completed reference form for this applicant, please return the form to the Society with an explanation of why you are unable to complete the form. Your completed reference form will be handled in accordance with the *Freedom of Information and Protection of Privacy Act*. *Your comments will only be shared with the applicant in accordance with the Act upon his or her request and only if the comments cannot be attributed to you.*

Please submit your completed form directly to the CSAP Society. Forms returned care of the applicant will not be accepted. Should you have any questions about this form or about the CSAP Society, please do not hesitate in contacting Society staff.

For Completion by the Reference

1. Your relation to applicant: **Supervising Professor** **Professional Reference**

2. For how long have you known the applicant professionally? From: (month/year): To: (month/year):

3. **Supervising Professor**, Please comment on the applicant’s research abilities and the relevance of the candidate’s project or thesis. In addition, comment on the extent to which the applicant demonstrates innovation and forward thinking.

4. **Professional Reference**, Please comment on the candidates professional or community involvement. In addition, comment on the extent to which the applicant demonstrates innovation and forward thinking.

I, as the **Supervising Professor**, verify that the information contained in the **Area of Research** section of the Application is accurate.

 Date: _____

I, as the **Professional Reference**, verify that the Academic and **Professional Involvement Sections** of the CSAP Scholarship Application are accurate.

 Date: _____

Once completed, please return the form by March 31, 2020 at 5pm Pacific Standard Time;

- by e-mail to apopova@csapsociety.bc.ca

- by mail to: Attention: CSAP Scholarships
 613-744 West Hastings St.
 Vancouver, BC V6C 1A5

- or by fax to: Attention: CSAP Scholarships
 Fax: 604-451-4558