

OTTAWA-CARLETON INSTITUTE FOR BIOMEDICAL ENGINEERING
PREFERENCE FORM

Family Name		Given Name(s)	
Email:		Student #:	

Please read the following carefully and check the boxes that apply to your program selection:

I am applying to the **Master of Applied Science** in Biomedical Engineering program (thesis option)

If I am not admitted to the thesis option program at the University of Ottawa, please consider my application for the non-thesis option. No research funding is provided to students in the M.Eng. program.

I am applying to the **PhD** in Biomedical Engineering program

Supervision:

I have made arrangements with a Professor and my supervisor will be: _____
 (You can find a complete list of potential supervisors, by area of research, at the following link: <https://engineering.uottawa.ca/graduate-programs/thesis-supervisors>)

If not, indicate your preference for specialization:

Choice	Academic Unit / Program Field
1	
2	
3	

Financial Support:

Estimated yearly expenses for a single Visa student (tuition, accommodation, meals, incidental expenses, etc.) can be found at: https://international.uottawa.ca/en/study-at-uottawa/prospective-students . If you cannot finance your own studies and funding cannot be arranged from the University, you will not be offered admission, regardless of your academic merit.		
I am NOT prepared to finance my studies. I understand that my application may be rejected, regardless of academic merit, if the University of Ottawa cannot arrange financial support.		
I am prepared to finance my studies from resources, in part or full, as stated below (include Canadian dollar amounts).	Fully	Partially
Source of Funding	Description	CDN\$ Amount
Scholarship:		
Other means:		