# Vanier Canada Graduate Scholarship <br> Preliminary Ranking Form 

## Department <br> Select

Total Number of applications reviewed by the department for the current competition

Please list the name(s) of your nominee(s) in rank order.

| Rank | Surname | Given Names (in full) | ID Number |
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## Department Declaration:

By signing this form, I confirm that:

1. I have reviewed the listed applicants' Vanier Preliminary Assessment Package(s).
2. I am aware, regarding applicants that are selected to complete a full Vanier application, that I will be required to review the full application package and provide a Department Nomination Letter based on the guidelines set by Vanier.

Name of Graduate Coordinator/Department Chair
Signature (electronic or hand-written)
Date (MMM/DD/YYYY)
*This form can be electronically signed, or signed and scanned, and emailed to grad.awards@ualberta.ca from your UofA email account.

