## PhD Supplemental Information

- 1. Name:\_\_\_\_\_
- 2. Faculty member with whom you have an agreement for supervision:
- 3. CNO RN registration number:

I have uploaded my registration information

Not applicable - I am an international applicant

4. Will you receive or have you applied for any financial support for your studies in the form of an award, scholarship or other sources of funding? If yes, please indicate which awards, the dollar amount, and the duration.

International students: Please include information regarding scholarships from your government.

Award Amount	Duration
	Award Amount

5. Did you complete a thesis as part of your Master's degree?

Yes

No

a) If yes, was your thesis published?

Yes - please provide a link:\_\_\_\_\_\_

No - please provide your writing sample from your thesis (e.g. main chapter)

b) If no, please note that you may be required to complete a qualifying research project as part of your program requirements. If you have completed extensive research activity other than as a Master's thesis, please provide information in section 8 below as you may be exempted from the qualifying research project.  If the admissions committee determines that you will be required to complete a qualifying research project, would you be interested in beginn/MCID 1 >>>BDC -0bDC -0bDC -0bDC