

SGS Parental Grant Application

The SGS Parental Grant program aims to provide financial support to doctoral students within the funded cohort by helping to offset the loss of funding as a result of taking an approved parental leave of absence at the time of birth or adoption in order to provide full-time care during the child's first 12 months. Students are expected to request approval and make arrangements for a leave through their graduate unit (see SGS Leave of Absence Policy). The value of the grant will serve to cover the portion of a student's stipend/base funding paused while the student is on an approved parental leave of absence. Parental grants will be provided to eligible student parents of up to two sessions (8 months). Birthing parents may be eligible for an additional instalment to support parental leaves of three sessions (12 months) in duration. The total amount of the Grant will be calculated based on other non-employment related supplemental University funding the student may have available.

Grants will be disbursed by instalment at the beginning of each session and payable upon the start of the approved leave; up to two sessions for eligible non-birthing or adoptive parents and up to three sessions for eligible birthing parents). Grant applications submitted after the parental leave has commenced will be processed retroactive to the start of the leave and issued within 7-10 business days of SGS receiving the completed application.

In all cases payment is conditional upon the proper submission of proof of pregnancy, birth or adoption documentation. Applicants will receive an email notification notifying them of the grant application status and/or payment information via their U of T email address.

Student Information:			
Last Name:	First Name:		
Student Number:	U of T Email Address (all correspondence will be via this U of T address):		
Citizenship:	☐ Study Permit		
Program Start Date (MM/YYYY):	Graduate Unit/Department (e.g., Social Work):		
Degree Name (e.g., PhD, MSc):	Program Name (e.g., Adult Education and Community Development):		
Approved Leave Start Date:	Approved Leave End Date:	Total Months of Leave:	
Student Verification:			
To initiate a Parental Grant request, students are asl	ked to please confirm each of the f	following - I am:	
☐ Registered as a full-time student in a research-stream doctora☐ Within the funded cohort; and	al program in the session prior to my parer	ntal leave; and	
☐ Eligible to receive my regular funding package prior to and up	on return from my parental leave; and		
☐ While on leave and receiving the SGS Parental Grant, will be	the primary caregiver of the child; and		
☐ Not be engaged in studies, research activities or employment	(Teaching Assistantship excepted) during	the approved parental leave.	
Optional:			
☐ I am the birthing parent and would like to be considered for a	third instalment of the SGS Parental Gran	t.	
By signing below, I confirm that the above information is true and a (e.g. leave dates, withdrawal, change to part-time status).	agree to notify SGS and my graduate unit	of any changes to my registration status	
Student Signature:		Date:	

Please forward this application to your graduate unit to be completed and submitted to The School of Graduate Studies.



Graduate Unit's Request for Student Support:

Graduate Funding Information			
The above named student is:			
☐ Within the funded cohort and eligible for the full continuation of the same funding package upon		e graduate unit's normal period of fundi	ng and will be eligible for the
Please Select One:			
O Ineligible for other sources of pregnancy/parenta research grants, or scholarships/fellowships such			
O Receiving less than the stipend/base funding pactor the approved parental leave.	ckage amount per sessior	o of pregnancy/parental leave benefits fr	om other sources during
Please list all sources* and amounts of benefits i	ncluding any departmen	tal resources available:	Amount:
Source of benefits* (e.g. Paid parental leave from Tri-Agency scholarship or PI Research Grant) Total:			
 □ Proof of pregnancy, birth or adoption has been re □ Proof of pregnancy, birth or adoption will be prov □ Copy of Annual Funding letter, showing students Complete only if applicant is the birthing parent □ The above named student is the birthing parent as per the dates above and is eligible for a third of the content of the con	ided by the student at later because funding package. and has been approved for	date.	three sessions (or 12-months)
Graduate Unit Approval:			
By signing below, I confirm that the above information i leave date, withdrawal, and change to part-time status)	ŭ .	ort any changes made to this student's	registration status (e.g. approved
Name: Graduate Chair/Coordinator/Director:	Signature: Gradua	te Chair/Coordinator/Director:	Date:
Name: Supervisor/Advisor:	Signature: Supervi	sor/Advisor:	Date:
SGS Office Use Only:			
Decision: Approved	Not Approved	Amount Approved:	
GS Authorized Signature:		Notes (if applicable):	