

**Use this form to:**

- Apply to visit another Canadian university as a visiting graduate research student under the Canadian Graduate Student Research Mobility Agreement (CGSRMA).

**Instructions:**

1. Review the [CGSRMA web page](#) for full details to ensure that all steps of the approval process are completed.
2. Complete sections 1 & 2 and attach the Letter of Agreement (LOA) signed by the proposed supervisor at the host university and the head/chair of the host department/school.
3. Submit the completed form with attachment to your academic department for approval.
4. The Department's Graduate Co-ordinator will forward the approved form with LOA to Graduate Studies and Postdoctoral Affairs (GSPA) for approval.
5. GSPA will forward the approved form to the host university for approval.
6. The Faculty of Graduate Studies of the host university will send a copy of the completed form to Graduate Studies and Postdoctoral Affairs (home university).
7. GSPA will forward a copy to the home academic department for distribution.

**Section 1: Student information**

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University of Waterloo student identification number \_\_\_\_\_ Date of birth(mm/dd/yy) \_\_\_\_\_  
Last name(s) \_\_\_\_\_ First name(s) \_\_\_\_\_  
Email \_\_\_\_\_ Telephone number \_\_\_\_\_  
Current mailing address \_\_\_\_\_  
Immigration status:  Canadian citizen  Permanent resident  Student visa  Other \_\_\_\_\_  
Country of citizenship \_\_\_\_\_ Home department \_\_\_\_\_  
Degree Expected (e.g. Master of Arts) \_\_\_\_\_ Expected completion date(mm/dd/yy) \_\_\_\_\_

**Section 2: Request for approval to visit**

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Institution name \_\_\_\_\_  
Contact name(s) \_\_\_\_\_ Email: \_\_\_\_\_  
Term and year applied for:  winter \_\_\_\_  spring \_\_\_\_  fall \_\_\_\_  
Expected start date (mm/dd/yy) \_\_\_\_\_ Expected end date (mm/dd/yy) \_\_\_\_\_  
Have you ever attended the host university? yes  no  If yes, what was your student number there? \_\_\_\_\_  
Provide a brief description of purpose of visit: \_\_\_\_\_  
\_\_\_\_\_

I hereby accept and agree to abide by the policies, rules, and regulations of the host university while attending as a registered visiting researcher:

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
The host institution will not assess tuition fees, but student activity fees may be charged. This form, duly signed, will be the sole authority for this fee waiver.  
No other documentation is required.

**Section 3: Approvals** (this form will not be processed without all four signatures, obtained in the order 1 to 4.)

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The above-named student is in good standing (including current fee paid) in a graduate degree program and has permission to enrol as a visiting research student at:

Name of Host university \_\_\_\_\_ during the period of (mm/dd/yy) \_\_\_\_\_

**University of Waterloo**

**1. Supervisor**

Last name(s) \_\_\_\_\_ First name(s) \_\_\_\_\_

Signature: \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_

**2. Department Chair**

Last name(s) \_\_\_\_\_ First name(s) \_\_\_\_\_

Signature: \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_

**3. Associate Vice-President (or delegate), Graduate Studies and Postdoctoral Affairs**

Last name(s) \_\_\_\_\_ First name(s) \_\_\_\_\_

Signature: \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_

**Host University**

**4. Graduate Studies Office of the Dean**

Last name(s) \_\_\_\_\_ First name(s) \_\_\_\_\_

Signature: \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_