Montreal, , 20____

To :

Madam, Sir,

I am pleased to inform you that your application for a Research Training at the Université de Montréal has been accepted.

This Research Training at the _____ level (Undergraduate, Master or PhD) will be under my supervision according to the following conditions:

Location: campus of the Université de Montréal, within the Faculty and Department:

from _____, 20___ to _____, 20__. Duration:

You will be working on the following research project:

For more information on registration, please contact Graduate and Postdoctoral Studies (esp-international@umontreal.ca).

Yours sincerely,

NAME IN CAPITAL LETTERS :

NAME IN CAPITAL LETTERS :

Professor supervising the research training Director of Department / Dean