

## GRADUATE DEPARTMENT OF PHARMACEUTICAL SCIENCES

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## Letter of Support from Employer

Please complete this form, attach the letter and submit them with your application to the Graduate Department of Pharmaceutical Sciences.

The Letter of Support from your employer must include and address the following:

- 1) Confirmation of your employment, a description of your responsibilities and the relevance of the PhD degree to your employment;
- 2) Adequate time on campus to attend classes and fulfill the program requirements (attend courses, seminars, GRIP, advisory committee meetings, etc.);
- 3) Resources available to complete the program (note that since the student in the Flex-time PhD program option will maintain their full-employment, the research supervisor and the Department of Pharmaceutical Sciences will not be responsible for providing a stipend to support the living expenses and tuition fees of the student);
- 4) A written consent from the employer with assurances that the experimental work will be performed by you, if your research will be conducted in your employer's facilities;
- 5) The acknowledgement of Intellectual Property guidelines. The University's guidelines are located at:
  - www.sgs.utoronto.ca/currentstudents/Pages/Intellectual-Property.aspx
  - www.medresearch.utoronto.ca/misc attach pdfs etc/fmro IS-%20IP.pdf

My employer and I have read the University of Toronto Intellectual Property policies and procedures and are in agreement with the policies and procedures.

My employer and I have read the University of Toronto Intellectual Property policies and procedures. However, as the project will be treated as a collaborative project, I have attached my employer's agreement in accordance with the University's policies.

| Company Name                             |      |
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| Company Representative Signature & Title | Date |
|  |      |
| Student Signature                        | Date |
| Student Signature                        | Date |