

**University-Related Internship Activity**  
**Award Certification Form**

With this form duly completed and signed, you are herewith agreeing that the nature of the payment to the recipient is of an award or other form of financial assistance (see note immediately below on exclusions under financial assistance) for the express purpose

We understand that the tax treatment of this payment is subject to assessment and verification by the Income Tax Authorities and that a false declaration is considered to be a serious offence.

I understand that I am obligated to return all internship award money received if I have falsified any information on my application, or if I do not satisfactorily complete the internship.

Required Signatures:

Award Recipient:	Date:
Internship Officer:	Date:

Note:

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