

This form must be completed by the graduate student and submitted as part of your fellowship application by Dec. 1 in order to be considered for the Summer Doctoral Research Fellowship Program.

Student Information

First and Last Name:

First semester/year enrolled in your current graduate program:

Anticipated graduation (semester/year):

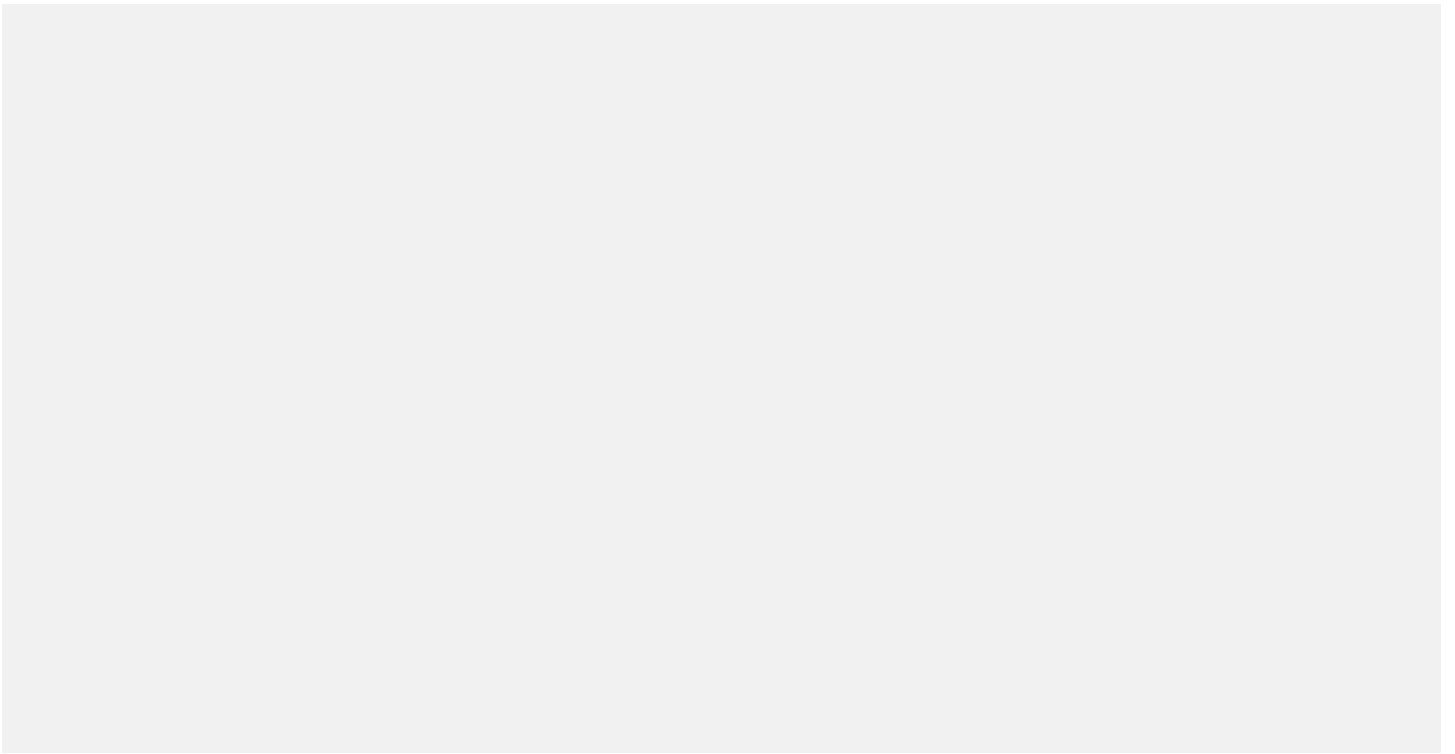
Please check all the milestones below that are completed:

- | | | |
|---|--|--|
| <input type="checkbox"/> All required coursework | <input type="checkbox"/> Comprehensive exams | <input type="checkbox"/> Preliminary exams |
| <input type="checkbox"/> Dissertation prospectus/proposal | <input type="checkbox"/> Defense of dissertation prospectus/proposal | |

Please explain the research, scholarship, or creative activity you will do this summer if awarded this Fellowship: (300 words or less)

[Large empty text area for response]

Please explain how this fellowship will impact your degree progression and anticipated graduation: (300 words or less)



Student Signature

By signing below, I certify that all information on this application is accurate, and I agree to the terms and conditions of the Summer Doctoral Research Fellowship Program.

Student signature (type name)