

FLORIDA STATE UNIVERSITY
International Dissertation Semester Research Fellowship Application
2010-2011

PLEASE TYPE OR PRINT NEATLY IN THE SPACES BELOW:

NAME (Last, First and Middle Initial): _____

SOCIAL SECURITY NUMBER: _____ **DEPARTMENT:** _____

ADDRESS (Street, City, State, Zip Code):

PHONE NUMBER: _____ **E-MAIL ADDRESS:** _____

REQUESTING AWARD FOR: SUMMER 2010 ___ **FALL 2010** ___ **SPRING 2011** ___
SUMMER 2011 ___

MAJOR PROFESSOR (Name and Phone Number):

GRADUATE GPA: _____ **FLORIDA RESIDENT: YES** ___ **NO** ___

U. S. CITIZEN: YES ___ **NO** ___

LIST HONORS AND AWARDS: (attach separate sheet if necessary)

LIST PUBLICATIONS AND/OR PRESENTATIONS: (attach separate sheet if necessary)

Are you currently receiving any university funding? ___ **YES** ___ **NO**

If yes, please list: _____

Applicants Signature: _____ **DATE:** _____

No applicant will be considered without the certification of eligibility by the Department Chair or College Dean as appropriate.

_____ **DATE:** _____

Department Chair and/or College Dean

APPLICATION DEADLINE TO THE GRADUATE SCHOOL: JANUARY 18, 2010, 5:00 PM (EST)

NOTE: If due date falls on a weekend or holiday, departments can submit applications on the first workday following the deadline.