

GRADUATE SCHOOL DIVERSITY RECRUITMENT FELLOWSHIP

Nomination Cover Sheet*

DEPARTMENT _____

NAME _____

UT EID: _____

ADDRESS _____

CITY, STATE, ZIP CODE _____

PHONE: (_____) _____ EMAIL ADDRESS: _____

NAME OF UNDERGRADUATE INSTITUTION _____ GPA: _____

NAME OF GRADUATE INSTITUTION _____ GPA: _____

GRE SCORES: Verbal _____ Quantitative _____ TOTAL _____

Area percentiles: _____

HONORS:

RESEARCH EXPERIENCES:

ACTIVITIES:

DIVERSITY NEED MET:

RANKING: Student is in the top (check one 10% 20% 30% 50%) of applicants for our program.
***NOTE:** *To qualify for a fellowship a student must be in the top 10% of students entering their program, otherwise we need a letter explaining why your program considers the student worthy of a fellowship and how this student helps meet your program's diversity needs.*

DEPARTMENTAL SUPPORT

Will the department offer supplemental support to this student beyond this fellowship? ___ Yes ___ No

If YES, what type of supplemental support? ___ 20 hr TA ___ 10 hr TA ___ 5 hr TA

___ Other (_____)

Does the department plan to offer second year support to this student? ___ Yes ___ No

If YES, what type of 2nd year support? ___ TA ___ GRA ___ Departmental Fellowship

Printed Name of GA _____

Signature (Graduate Adviser) _____