

Fellowship Application Form for Continuing Ph.D. Students
 Department of Middle Eastern, South Asian and African Studies
Due Date: April 22

BASIC INFORMATION

Last Name		
First Name		
UNI		
Field of Study		
Advisor(s)		
Year of First Term Enrolled		

DEGREE COMPLETION TIMELINE

Please list the date or projected date for the following steps in completing your degree.

	Item	Date (month & year)
1	check one: <input type="checkbox"/> advanced standing <u>OR</u> <input type="checkbox"/> M.A. for Ph.D. Candidates	
2	MPhil Completion	
3	Date of Prospectus Defense	
4	Date of Dissertation Defense	

List below the names of the committee members for your upcoming degree (MA, MPhil, PhD)

Name of Degree MA MPhil PhD

Faculty Name	Department

Coursework

2. Do you have any incompletes? yes no If yes, please list:

Course	Reason for Incomplete	Intended date to complete work

2. Please list the courses that you plan to take in the coming academic year:

Course (number/name)	Day/Time	Semester

Languages List all languages, required for your degree and/or research.

Language	Date of Proficiency Certification

If you are taking a medical or leave of absence, please indicate below with planned dates of leave and return from leave.

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Fellowship Applications

1. Indicate if you have applied for the grants/fellowships and list them below, and specify all other grants/fellowships for which you have applied. Indicate the result, if known. Otherwise, write "pending."

Grant	Result

2. If you are not applying for dissertation research grants when will you do so? _____

Fellowship Status

2. Current Academic Year (2018-19). Check the appropriate box and list either the name of the external fellowship or the teaching appointment for each semester.

Term	Name of Fellowship or Teaching Appointment
Fall 2017	
Spring 2018	

Teaching

1. Attach to this form a copy of teaching evaluations for the most recent two courses TA'ed.
2. List all teaching appointments since entering the program.

Term	Course Number	Course Title	Instructor

3. List your first and second preferences for teaching appointment for the 2019-20 academic year.

	Term	Course Number	Course Title	Instructor
1				
2				

4. If you have strong reason a specific course in a specific semester or avoiding/repeating specific courses, explain:

Signature of Student: _____ Date _____