**Application to a travel fellowship in the New Biology Graduate Fellows Program**

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| **APPLICANT'S GENERAL INFORMATION**  |
| Last Name  |  | First  | M.I.  | Date  |
| Street Address  |  | Apartment/Unit #  |
| City  |  | State  | ZIP  |
| Phone  |  | E-mail Address  |  |
| Birthday: | Country of birth: |  |
| Gender: Male \_\_, Female \_\_\_ |  |
| Citizen or permanent resident of the United States of America? Yes \_\_, No \_\_\_ |
| Ethnicity, Hispanic or Latino: Yes \_\_, No \_\_\_Race: Native American / Alaska Native \_\_, African American \_\_, White \_\_, Asian \_\_,Native Hawaiian or Pacific Islander, \_\_ Other (Please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **APPLICANT'S ACADEMIC INFORMATION**  |
| B. Sc. College or University and Department: |
| If applicable, M. Sc. University and Department: |
| B. Sc. GPA: | If applicable, M. Sc. GPA:  |
| B. Sc. year of graduation: | If applicable, M. Sc. year of graduation: |
| **APPLICANT'S RESEARCH PROJECT SELECTION**  |
| Name of faculty mentor and Department at the University of Illinois: |
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| **REFERENCES**  |
|  |
| Full Name  | Relationship  |
| Company/University  | Phone ( )  |
| Email:  |
|  |  |
| Full Name  | Relationship  |
| Company/University | Phone ( )  |
| Email  |
|  |  |
| **CLAIMER AND SIGNATURE**  |
| I certify that my answers are true and complete to the best of my knowledge. If this application leads to receiving a graduate studies or travel fellowship, I understand that false or misleading information in my application will compromise the fellowship award.  |
| Signature Date  |