

# **Prospective Applicant Form**

You can expect to spend approximately 10-15 minutes filling out this form. You may wish to read it in full before you begin, as you do NOT have the option to save and return or edit this form after submission.

First Name *
As it appears on your passport or driver's license.
Middle Initial
Last Name *
Nickname/Preferred Name
Pronouns *
She/He/They
UR Student ID *
University Email *
example@ur.rochester.edu

If not applicable, please enter your UR email again
Preferred Phone Number *
Please select all that apply:  Transfer student from a 2 year school  Transfer student from a 4 year school  International student  Take5 or e5 student
Select One *
Undergraduate, Graduate, Alumni
Graduation Year *
Major(s) *
Minor(s)
Certificate(s)
Cumulative GPA *
Take Five/e5 Program Topic

Alternative Email \*

Program *
Degree *
PhD, MS, MA, MBA, etc.
Expected Year of Completion *
Undergraduate Degree(s) Earned *
B.A., Art History; B.S., Chemistry
Undergraduate Cumulative GPA *
Undergraduate Certificate(s) Earned
Permanent Address *
Where you live when you are NOT at school.
City *
State of Legal Residency

## Citizenship \*

United States
Non-US
Prefer not to answer
Other

### Country of Citizenship \*

Please do not use country codes; spell out fully if not US.

#### If you are a PERMANENT RESIDENT, are you seeking U.S. citizenship?

Yes

No

Not yet eligible, but plan to seek citizenship upon eligibility

#### If YES, when do you expect to receive your U.S. citizenship?

Please enter month & year (e.g. May 2024 or 05/24)

### Recommenders

Indicate FOUR persons whom you MIGHT ask to write letters of recommendation in support of your fellowship application(s). Please note: we understand that the names entered here may change as you go through the application process; listing someone here is NOT binding.

FIRST RECOMMENDER: Name

FIRST RECOMMENDER: Email address

FIRST RECOMMENDER: Position / Title

e.g. Professor; Marketing Director; Department Chair; Dean of Admissions, etc.

FIRST RECOMMENDER: Department / Organization

e.g. Department of Microbiology, Johns Hopkins University; UR Physics Dept, etc.

SECOND RECOMMENDER: Name

**SECOND RECOMMENDER: Email address** 

**SECOND RECOMMENDER: Position / Title** 

e.g. Professor; Marketing Director; Department Chair; Dean of Admissions, etc.

**SECOND RECOMMENDER: Department / Organization** 

e.g. Department of Microbiology, Johns Hopkins University; UR Physics Dept, etc.

**THIRD RECOMMENDER: Name** 

THIRD RECOMMENDER: Email address

**THIRD RECOMMENDER: Position / Title** 

e.g. Professor; Marketing Director; Department Chair; Dean of Admissions, etc.

**THIRD RECOMMENDER: Department / Organization** 

e.g. Department of Microbiology, Johns Hopkins University; UR Physics Dept, etc.

**FOURTH RECOMMENDER: Name** 

**FOURTH RECOMMENDER: Email address** 

**FOURTH RECOMMENDER: Position / Title** 

e.g. Professor; Marketing Director; Department Chair; Dean of Admissions, etc.

**FOURTH RECOMMENDER: Department / Organization** 

## **Awards of Interest**

Please indicate at least one award you would like to discuss with the Fellowships Office. You may choose multiple options from the list below: \*

Astronaut Scholarship

Beinecke

Critical Language Scholarship

DAAD/RISE

**Projects for Peace** 

**Fulbright** 

Gaither Junior Fellowship

Goldwater

Luce

**NSF** 

Truman

Udall

Churchill (Fellowship for study in the UK)

Gates Cambridge (Fellowship for study in the UK)

Marshall (Fellowship for study in the UK)

Rhodes (Fellowship for study in the UK)

St. Andrew's (Fellowship for study in the UK)

Mitchell (Fellowship for study in Ireland)

Chinese Government Scholarship (Fellowship for study in China)

Schwarzman (Fellowship for study in China)

Yenching (Fellowship for study in China)

Other

## Résumé & Waiver Form

## Please read the following carefully.

You must sign the waiver below if you wish to be nominated or endorsed by the University for a fellowship or award.

By my signature below, I acknowledge my understanding that both my personal reputation and the reputation of the University

of Rochester can benefit from the manner in which I represent myself. I therefore affirm my wish to be considered for formal nomination or endorsement by UR for a national student fellowship or award.

To that end I hereby grant the following permissions and waivers, with the understanding that the purpose of this release is for the University of Rochester to consider my application or nomination for a merit-based national scholarship or fellowship.

- 1. I waive my right to view recommendation, nomination, or endorsement letters written for the purpose of the fellowship competition. While the authors may provide copies of these letters to me, I understand that this is a courtesy by the author and does not affect this waiver.
- 2. As required under the Family Educational Rights and Privacy Act, commonly known as FERPA, I give permission for my grade point average (GPA), transcripts, individual course grades, and individual assignment grades to be used and discussed as a part of the award competition. I give permission for the Fellowships Office of the University of Rochester to request official and unofficial copies of my transcript(s) as part of the application process.
- 3. I grant my consent to the Fellowships Office of the University of Rochester to check my official college records for any violations of either the University's academic or conduct policies.
- a. I waive my rights of confidentiality in my Board on Academic Honesty records and authorize the Board to report to the Fellowships Office any record of violations for which I have been found responsible.
- b. I waive my rights of confidentiality in regards to any UR conduct offense violations and authorize the Fellowships Office to obtain a copy of any disciplinary report(s) from the Office of the Dean of Students. The ODOS may also provide contextual information as to the severity of those offenses.
- 4. I consent to the Fellowships Office sharing selected information about my fellowship/scholarship application for the purpose of publicity, especially as to any success I may have in the competition.
- 5. I agree to notify the Fellowships Office if I withdraw from competition.

#### **Regarding Generative Al:**

Please be aware that many competitive fellowships do not permit the use of generative AI tools. We expect you to familiarize yourself with and adhere to the rules and guidelines of any fellowship you apply to.

If you use generative AI in drafting an application that permits the use of these tools, we expect that you will disclose it to the fellowships advisor you are working with, and that you will be ready to discuss how and why you used the tool in the composition process.

Furthermore, we expect you to be knowledgeable about and follow University of Rochester policies regarding academic honesty and the use of generative AI for any writing that you submit to the Fellowships Office in connection to any fellowship or award for which you are seeking advisement, endorsement, or nomination.

OPTIONAL: I understand that by checking this box, I agree that the Fellowships Office may also use an anonymized version of my application essay(s) for the purpose of training other applicants. \*

I agree I do not agree

I understand that my next step is to EMAIL the Fellowships Office for an appointment at URFellowshipsAsst@UR.Rochester.edu. \*

YES

#### **Tags**

Todo In Progress Done