

Graduate Fellowship Fund

GALLAUDET UNIVERSITY ALUMNI ASSOCIATION
PEIKOFF ALUMNI HOUSE • KENDALL GREEN • WASHINGTON, DC 20002-3695

Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ (VP, TTY or V?) Email Address: _____

Social Security Number: _____ Date of Birth: _____

To apply for a fellowship, you will need to fill out the form below and to submit the following along with the form:

1. An audiological assessment of the status of your hearing. The battery of hearing tests, performed by a clinically certified audiologist (American Speech and Hearing Association, Certification in Clinical Competence—Audiology) should include: pure tone and speech audiometry, impedance measures, and aided performance results (hearing aid/cochlear implants).
2. A letter from the person who will supervise your study program, stating that you have met all requirements for admission and have been accepted. *This is required before your application will be considered.*
3. A list of the courses you plan to take in your major field of study, with a letter from your advisor indicating that the proposed program is accredited and considered to be at the doctorate or terminal level.
4. *Official* transcripts of courses and grades from all accredited colleges and universities you have attended.
5. Letters of reference from three professionals who are qualified to evaluate your capacity to do graduate work.
6. A copy of your Free Application for Federal Student Aid (FAFSA) student aid report. (This can be obtained from www.fafsa.ed.gov.)
7. A copy of your income tax return for this year, which is the most recent copy that you have filed.

The postmarked deadline for your application and all supporting material above to be submitted is April 20. Applications received after this date will not be considered. For more information about the Graduate Fellowship Fund, you can check http://alumni.gallaudet.edu/GFF_Info.xml. Address all correspondence to Chair, Graduate Fellowship Fund Committee, Peikoff Alumni House, Gallaudet University, 800 Florida Avenue, NE, Washington DC 20002.

1. List all colleges and universities previously attended:

College and location	Date (years)	Degree/credits
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Name and address of the department and university or college where program of study is being or will be pursued:

(Continue to back of this form)

3. Field or specialization: _____
 Minor (if any): _____
4. Specify degree being pursued: _____
5. Anticipated graduation year: _____
6. Name of department head and/or advisor: _____
7. Attach either a letter from your advisor relative to or a copy of that part of the university catalog that states the number of credit hours constituting a full load per semester.
8. How many credit hours will you be taking per semester? _____
9. What are your goals in pursuing this program of study? Use a separate sheet and attach it to this application.
10. Will you be employed during the coming year?
 not employed part time full time on leave
11. If you are working, please write the name and address of your workplace:

I hereby attest to the truth of the statements made herein.
 I further agree to report to the Committee any changes in my status or in my financial situation if such should develop.

Applicant's signature: _____ Date: _____

CHECKLIST – For Committee Use Only

- | | |
|---|---|
| 1. <input type="checkbox"/> Acceptance for admission to doctoral program. | 5. <input type="checkbox"/> Transcripts |
| 2. <input type="checkbox"/> Audiological report | 6. <input type="checkbox"/> References (3) |
| 3. <input type="checkbox"/> Program of study | 7. <input type="checkbox"/> FAFSA report |
| 4. <input type="checkbox"/> Copy of income tax return | 8. <input type="checkbox"/> Application completed |

All steps for consideration have been completed. GFF Chairperson's initials: _____