FELLOWSHIP APPOINTMENT DATA FORM

Fellowship Type: ☐ Presidential ☐ Moore

Person Number: _____ Social Security Number: _____

☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr. ☐ Male ☐ Female

Name: _____ _____ _____
(Last Name) (First Name) (Middle Initial)

Email address: _____

Date of Birth: _____
(Month/Day/Year)

Ethnicity: _____
(see Ethnicity Codes at right)

Ethnicity Code
01 - Black
02 – Hispanic
03 – Puerto Rican
04 – Alaskan/American Indian
05 – Asian/Pacific
07 – White
08 – Other
09 - Unknown

Is the fellow an international student? ☐ Yes ☐ No

If **yes**, please check your visa type: F1 ☐ F2 ☐ J1 ☐ J2 ☐ H1B ☐ OTHER_____

NOTE: International students receiving Presidential or Moore fellowships will also be required to submit the Nonresident alien scholarship/fellowship voucher form and the Request for scholarship/fellowship payment to a nonresident alien form to 408 Capen Hall along with this form.

Home Phone Number: _____ Work Phone Number: _____

Address: _____
(Street)

_____ _____ _____
(City) (State) (Zip Code)

DEPARTMENTAL INFORMATION:

Academic Department: _____ Faculty/School: _____

TA/GA Appointing Department: _____
(If different) (Please attach a copy of the student's Personnel Transaction form if available)

Checksort Code: _____

Amount to be paid by Graduate School $ _____

Graduate School Cost of Education Allowance*$ _____

Amount to be paid by appointing department $ _____

Total amount of award $ _____

Department Head Signature: _____

Dean Signature: _____

FOR GRADUATE SCHOOL USE ONLY:

Award Amount: _____ Pay Frequency: _____ Account Number: _____

Pay Period Begin: _____ Pay Period End: _____

*Available for select Nursing, Management and all Roswell Park Students. Note: These students must apply for reimbursement to the Graduate School for these funds by the end of the academic year.