



FIRST YEAR PH.D. AND M.S. TUITION-ONLY SCHOLARSHIP STUDENTS 2008-2009

REQUIRED INFORMATION: SOURCE(S) OF SUPPORT

Please review the information on reporting requirements at http://www.dagsi.org/pages/sp_reportreq.html prior to completing the form.

This form should be submitted by all first-year DAGSI students holding Ph.D. or M.S. tuition-only scholarships. Ph.D. students with DAGSI assistantship + tuition scholarships should fill out the assistantship student form.

Download the form, fill it out electronically, and print when completed. Sign where indicated. Submit the completed form to DAGSI by fax (937-781-4005) or by mail (3155 Research Blvd., Ste. 205; Kettering OH 45420). Alternatively, the signed form may be scanned and submitted electronically to kalam@dagsi.org.

This form is due at the DAGSI office no later than 5 p.m. EST on Friday, February 6, 2009. No documents will be accepted after that date.

This form is subject to the Privacy Act of 1974 (5 USC 552A).

DAGSI Student Information

Last name _____

First name _____

Middle name _____

Email address _____

Daytime phone number _____

Home Institution _____

Department _____

Major _____

GPA _____

Anticipated graduation date (mm/yyyy) _____

Source(s) of support

DAGSI support is available for a maximum of two years. For you to receive your second year of funding, DAGSI needs to know your plan for support. For Ph.D. students, we need to know your plan for funding sources beyond the two years of DAGSI support. For M.S. students, we need to know your sources of support above and beyond tuition. So, for all tuition-only scholarship students, what sources of support have you identified to enable you to complete your graduate program? Please check all that apply. Identify sources of support only; please do not provide actual dollar amounts, as we consider that personal and private information.

- Faculty support via research funding (please provide faculty name and research project title)

- Another scholarship or fellowship (specify source)

- Employment (name of employer; job title; starting date mm/yyyy)

- Personal resources

- Other (specify)

Certification

I certify that to the best of my knowledge the preceding information is true and accurate. I understand that any misrepresentation of facts will invalidate the form and may cause me to lose my DAGSI scholarship.

Signature of student _____ Date _____