



Fellowship Office
Graduate School

Southern Illinois University
1263 Lincoln Dr., Mailcode 4716
Carbondale, Illinois 62901



GRADUATE DEAN'S FELLOWSHIP PACKET CHECKLIST

Southern Illinois University is an equal opportunity employer and will not discriminate against any person on the basis of race, ethnic origin, or sex.

Department/Program: _____

Nominee Last Name: _____ Nominee First Name: _____

DAWG Tag #: _____ Master's Doctorate

Please check off appropriate box when each document has been included in the packet.

ALL DOCUMENTS below **MUST** be included in the fellowship packet to be processed. Please arrange documents in order listed below. Packets with incomplete or missing documents will be returned which will delay the fellowship selection process and may even render the student ineligible depending on which documents are missing.

If you have questions, please contact the GA Office at (618) 453-4555.

REQUIRED DOCUMENTS:

- Fellowship Packet Checklist
- Application for Graduate Dean's Fellowship
- Departmental Fellowship Nomination Form
- Award Essay
- Nominee's Personal Statement
- Nominee's Curriculum Vitae
- Nominee's Letters of Recommendation (3)
- Nominee's Official Transcripts (for ALL schools attended)
- Nominee's Official Standardized Test Score (If required for admission)

Preparer Information for Questions/Problems:

Packet Prepared By: _____

Preparer's Phone: _____

Preparer's Email: _____

Preparer's Mail Code: _____



Graduate Dean's Departmental Nomination Form

Department/Program: _____

Prepared by: _____

Preparer Phone: _____

Nominee Last Name: _____

Nominee First Name: _____

DAWG Tag #: _____

Undergraduate Major: _____

Date of Degree: _____

UGPA Cumulative: _____

UGPA Last 2 Years: _____

GRE/MAT/GMAT results (at least one test score required):

GRE: V% _____ Q% _____ A% _____

MAT: _____

GMAT: V% _____ Q% _____ W% _____

Departmental Rank: _____ of _____

PLEASE TYPE the reasons the student is being nominated and the basis for department ranking (attach second page if needed):

FOR DEPARTMENT SIGNATURE

Your signature confirms that your department has accepted this student for the above degree program, and that the department is making the above commitment in nominating the student for the above fellowship award(s).

Department Chair or Director of Graduate Studies

Date

Department



**Graduate Dean's Fellowship
Nominee's Award Essay**

PLEASE REPLACE THIS PAGE WITH NOMINEE'S AWARD ESSAY
(Two pages maximum)



**Graduate Dean's Fellowship
Nominee's Personal Statement**

PLEASE REPLACE THIS PAGE WITH NOMINEE'S PERSONAL STATEMENT
(Three pages maximum)



**Graduate Dean's Fellowship
Nominee's Curriculum Vitae**

PLEASE REPLACE THIS PAGE WITH NOMINEE'S CURRICULUM VITAE



**Graduate Dean's Fellowship
Nominee's Letters of Recommendation**

**PLEASE REPLACE THIS PAGE WITH NOMINEE'S LETTERS OF
RECOMMENDATION**

(Three letters of recommendation are required)



**Graduate Dean's Fellowship
Nominee's Official Transcripts**

PLEASE REPLACE THIS PAGE WITH NOMINEE'S OFFICIAL TRANSCRIPTS
(Must include copies of official transcripts from ALL degree granting institutions)
(Transcripts from SIU can be unofficial)



**Graduate Dean's Fellowship
Nominee's Official Standardized Test Score Transcript**

**PLEASE REPLACE THIS PAGE WITH NOMINEE'S OFFICIAL STANDARDIZED
TEST SCORE**

*(At least one copy of official standardized test score is required)
(Acceptable standardized tests: GRE, MAT, or GMAT)*