

Ralph Brauer Graduate Student Special Activities Fellowship Application

Graduate School - University of North Carolina Wilmington

Students that are receiving Financial Aid will also need to complete and attach a [Budget Increase Request Form](#) form Financial Aid.

1. Title of Special Activities Fellowship Proposal: (Do not exceed 60 characters, including spaces and punctuation).

2. Name of Applicant (Last, First, Middle Initial):

3. Student Identification Number:

4. Applicant's Department or Program:

5. E-mail Address:

6. Office Phone

7a. Dates of Proposed Award

From Through
MM/DD/YY MM/DD/YY

7b. Degree Sought During Award Period

7c. Expected Degree Completion Date

8a. LETTER OF SUPPORT 1 (ATTACH)

Name of Thesis/Project Advisor:

Department/Subdivision (If Any):

Office Phone:

Fax:

E-mail:

8b. LETTER OF SUPPORT 2 (ATTACH)

Name of Dean, Chair or Director of Department/School:

Department/School:

Office Phone:

Fax:

E-mail:

9. Amount of Funds Requested:

10. ATTACH BUDGET DETAIL FOR THIS REQUEST: Attach a separate budget statement to this application. List by line where student will be traveling; costs associated with travel (airfare, car expenses, lodging, food, and etc.), and any other expense falling under this request.

11. ATTACH A STATEMENT OF JUSTIFICATION of these expenses and discuss how funding of this project falls outside of currently existing funding for research activities, conference presentations, or other departmental or graduate school opportunities.

12. ATTACH A NARRATIVE STATEMENT (Single-spaced, 11-point font, two-page maximum) that fully describes the activity you propose to complete if this fellowship is granted. This should include: How the project activity will further the student's intellectual and professional development; how the project relates to the student's area of research and scholarship; and how this project will demonstrate outcomes related to his/her success in achieving a graduate degree.

13. APPLICANT CERTIFICATION AND ACCEPTANCE: I certify that the statements contained in this application package are true, complete and accurate to the best of my knowledge. I agree to comply with the terms and conditions of this award if it is issued as a result of this application. I am aware that any false, fictitious or fraudulent statements or claims may subject me to penalties, including loss of the Fellowship.

14. In many cases, scholarship donors request the name(s) and contact information of their scholarship recipient(s). However, due to the Federal Educational Rights and Privacy Act of 1974 (FERPA) in order to release this information UNC Wilmington requires your consent in the form of a signed release. Providing your name and contact information to the donors allows them to have a more personal connection in the process because they get to know exactly who is benefiting from their donation. It also enables them to potentially

create a relationship with you and also strengthen their ties with the university as a whole. Signing this release also enables the university to print your name and scholarship in the annual scholarship event program.

My signature below authorizes UNCW to provide my name and other directory information to the donor who funded the scholarship that I have been awarded.

Yes, You may release my information.

No, You may not release my information.

SIGNATURE (Required of Each Applicant)

CHECKLIST, HAVE YOU:

- Completed this face sheet accurately and in required detail?
- Completed and attached the narrative statement?
- Attached a detailed budget?
- Attached a statement of justification for budget?
- Attached two letters of support from your thesis/project advisor and dean, director or chair of your school/department/program that support and justify the activity, including the budget request?

LEAVE BLANK – FOR GS USE ONLY

Date Received by Graduate School:

Decision Date of Application:

Status of Application: