

2024-2025 Dissertation Fellowship (Round 1) Faculty Advisor Response Form

Student's Full Name:	_____
Student's UIN:	_____

Student Funding for Summer 2022

- GAT
 - Give Source funding for GAT:
 - Students department funds
 - Another department funds

- GAR
 - Give Source funding for GAR:
 - Faculty advisor
 - Student's department funds
 - Another department funds
 - Faculty advisor's discretionary funds
 - College funds

- GANT
 - Give Source funding for GANT:
 - Student's department funds
 - Another department funds
 - Faculty advisor's discretionary funds
 - College funds

- Hourly Wages
 - Give Source funding for Hourly Wages:
 - Student's department funds
 - Another department funds
 - College funds
 - External employment

- Scholarship/Fellowship
 - Give Source funding for Scholarship/Fellowship:
 - Department
 - College
 - External

- No Funding/Self-funded

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 - Another department funds
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 - Another department funds
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Give Source funding for Scholarship/Fellowship:
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 College funds
 External employment
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- Scholarship/Fellowship
Give Source funding for Scholarship/Fellowship:
 Department
 College
 External
-
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Please answer the following questions about the student's funding source:

Is the student's funding source for 2023-2024 and/or Spring 2024 available to continue or another source available to fund the student in Summer 2024?

Yes No

Is the student's funding source for 2023-2024 and/or Spring 2024 available to continue or another source available to fund the student in Fall 2024?

Yes No

I have read the student's plan for completing all PhD requirements during the Fall 2024 - Summer 2025 semesters and believe it is reasonable to accomplish.

Yes No

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Please answer the following questions about the student:

1. Discuss the productivity, scholarly accomplishments, and scholarly potential of the nominee:
Compare the nominee's record with other students at this stage. Cite specific achievements, where applicable.

2. Comment on the nominee's progress toward the degree in relation to the program's extension and norms; please note any unusual circumstances.



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Faculty Reviewer Requirement:

If student is awarded, I acknowledge that I will be required to review Dissertation Fellowship applications in future rounds. The Graduate and Professional school will reach out to reviewers after each round deadline to assist with the review process.

Initial

_____ Faculty Advisor - Printed Name	_____ Faculty Advisor Email
_____ Faculty Advisor - Signature	_____ Date