



## EMERGENCY FELLOWSHIP FUNDING APPLICATION

Instructions on <https://grad.msu.edu/emergency-fellowship-funding>. Completed forms should be emailed to the Graduate School at [gradschool@grd.msu.edu](mailto:gradschool@grd.msu.edu)

Date: \_\_\_\_\_

US. Citizen	Yes	No	Current Graduate	Doctoral
Permanent Resident	Yes	No	Program Enrollment:	Masters
International Student	Yes	No		Professional
				Medical/Law

If no, Country of Origin \_\_\_\_\_ Current Graduate GPA \_\_\_\_\_

Ethnicity (optional) \_\_\_\_\_ If you have federal financial aid, please consult the Office of Financial Aid to find out what the impact that this award would have on your aid package.

Student Name: \_\_\_\_\_ Last 4 digits of PID: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Department and/or Program: \_\_\_\_\_ College: \_\_\_\_\_

*I certify that the above student is making satisfactory progress towards a graduate degree.*

\_\_\_\_\_

*Major Professor* *Signature of Major Professor* *Date*

### SHARED FUNDING AND ENDORSEMENT

A signature is required below from the major professor, the department/program unit, and the college even if no funds are committed to support this request.

				TOTAL EXPENSES	1
Funding Provider	Name and email address	Signature	Account #		Amount from Provider
Major Professor				2	
Department / Program / Unit				3	
College				4	
Office for International Students and Scholars				5	
International students must have signature from OISS, 103 international Center or <a href="mailto:rademac2@msu.edu">rademac2@msu.edu</a>					
Other (specify)				6	
<b>TOTAL FROM FUNDING PROVIDERS (Add lines 2-5)</b>				<b>7</b>	
<b>Funds Requested from the Graduate School (Required)</b>				<b>8</b>	

Revised 8/2020

Amount Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_