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THE UNIVERSITY OF TEXAS AT AUSTIN

Application for SYLFF Doctoral Fellowship in Business

☐ Mr.
☐ Ms.

FAMILY NAME _____ First Name _____ Middle Name _____ UT EID _____

Current Address _____ Present Phone _____
Street

City _____ State _____ Zip Code _____ Email _____

Home Address _____ Home Phone _____
Street

City _____ State _____ Country _____ Postal Code _____

Birthdate _____ Month _____ Day _____ Year Birthplace _____
City, State, Country

Residence and Citizenship Information: ☐ Resident of Texas

☐ U.S. Citizen ☐ Citizen of _____ Country ☐ Nonresident Alien in U.S. _____ Type of Visa

Doctoral advisor _____ Expected graduation date _____

Major area of study _____ Area of Specialization _____

POST-HIGH SCHOOL EMPLOYMENT AND PROFESSIONAL EXPERIENCES:
(include military service, exclude part-time and summer work)

Employer	Occupation	City, State, Country	Dates (Month and Year) From	To

LIST MAJOR HONORS, AWARDS, FELLOWSHIPS, SCHOLARSHIPS AND ASSISTANTSHIPS RECEIVED:

Type	Grantor	Date	In Recognition of	Amount

I certify that all information given on this application is complete and correct.

_____ Signature of Applicant

_____ Date

No Person shall be excluded from participation, denied the benefits of, or be subject to discrimination under any program or activity sponsored or conducted by The University of Texas System of any of its component institutions, on any basis prohibited by applicable law, including, but not limited to , race, color, national origin, religion, sex, or handicap.

THE UNIVERSITY OF TEXAS AT AUSTIN

Application for SYLFF Doctoral Fellowship

VITA - please attach, or complete here

THE UNIVERSITY OF TEXAS AT AUSTIN
Application for SYLFF Doctoral Fellowship
STATEMENT OF PURPOSE

Name: _____ _____ _____

UT EID : _____

Graduate Program: _____

Area of Specialization: _____

Please describe your current dissertation research in detail, including the topic and your approach to it, with enough detail to make your account understandable to a faculty member in a discipline related to, but not identical with, yours. In particular, please discuss how your research will combine international and business perspectives to make a meaningful contribution to this body of knowledge. If desired, include any background information you may think relevant. Please limit yourself to no more than this page and one additional printed page.

Name: _____ _____ _____

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REQUEST FOR DOCTORAL ADVISOR RECOMMENDATION

Under the provisions of the Family Educational Rights and Privacy Act of 1974, this applicant will have access to the information provided below unless he/she has waived such access.

(Applicant complete top section)

1. Name of Applicant _____ _____ _____
2. Graduate Program _____
3. (Optional) I hereby waive my right of access to the material recorded below.

_____ _____

Signature of applicant Date

To the Doctoral Advisor: Please provide your judgment of this candidate's qualifications and promise, of the candidate's intellectual ability, motivation and capacity for research or for acquiring professional skill. We are also interested in any comments you may have on his or her ability to merge international and business perspectives in the research. Finally, we would also appreciate your checking, for comparative assessment, the boxes below.

please add additional pages, as needed

I would compare the applicant with other students of the same level as follows.

	EXCEPTIONAL	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	NO INFORMATION
Intellectual Ability	☐	☐	☐	☐	☐
Writing Ability	☐	☐	☐	☐	☐
Speaking Ability	☐	☐	☐	☐	☐
Academic Preparation	☐	☐	☐	☐	☐
Motivation	☐	☐	☐	☐	☐
Maturity	☐	☐	☐	☐	☐
Teaching Ability	☐	☐	☐	☐	☐

I have known the applicant for approximately_____ years.

In summary, I would give a: Very Strong ☐ Strong ☐ Average ☐ Below Average ☐ recommendation.

Recommendation with reservation (Please explain) ☐

Advisor's signature: _____ Title _____ Date _____

Name Printed or Typed _____ Address _____