**APPLICATION FORM**

**Date of Submission**: Select date **Term Applying** Select term

**Name**: Enter first and last **CWID**: Enter CWID

**Mines Email**: Enter email **Phone**: Enter number

**Residency**: Select Residency

**Degree-Granting Department or Program**: Select Department

**Degree**:Select Degree

**Name of Primary Academic Advisor**: Enter Advisor

**Name of Department Head/Program Director**: Enter Department Head

**Name of Department/Program Manager or other staff person responsible for student’s contract:** Enter Name

**First semester enrolled in graduate school at Mines**: Select Term Enter Year

**In which semester did you become eligible for Reduced Registration**: Select Term Enter Year

Please fill out your sources of previous funding for all FALL and SPRING terms you have been enrolled at Mines to date\*:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Yr/term | Funding | Yr/term | Funding | Yr/term | Funding | Yr/term | Funding |
| e.g. Fall 19 | e.g. TA |  |  |  |  |  |  |
| Yr/term | Funding | Yr/term | Funding | Yr/term | Funding | Yr/term | Funding |
|  |  |  |  |  |  |  |  |
| Yr/term | Funding | Yr/term | Funding | Yr/term | Funding | Yr/term | Funding |
|  |  |  |  |  |  |  |  |

\*If needed, you may include additional information on prior funding in your Application Letter (described below)

**Advisor certification**: I have fully reviewed this application and all attached documents and hereby certify the content as accurate:

Advisor name first and last  **Date signed**

Printed Name Signature Date

**ADDITIONAL APPLICATION DOCUMENTS**

In addition to this form, each ***student applicant*** must provide the following:

1. An Application Letter describing the reason(s) why this last-resort, final semester funding is needed to complete your program. Appropriate documentation must be attached.
2. A Timeline for Completion of degree requirements, including major milestones such as any remaining research steps, thesis writing, committee review, anticipated defense date, etc. (1 page or less; you may include tools such as a Gantt Chart).
3. Transcript

***To avoid delays in processing your application, please compile all of these documents into one file/folder when submitting electronically to*** [***grad.services@mines.edu***](mailto:grad.services@mines.edu)

In addition to signing the application form above, each student’s ***academic advisor*** must submit, ***separately*,** a letter containing the following (*same due dates apply; send to* [*grad.services@mines.edu*](mailto:grad.services@mines.edu) *with* ***“Completion Fellowship Support Letter – Student Name” in the subject line***):

1. Statement that includes:

* a description of the reason(s) why this last-resort, final semester funding is needed for the student to be able to complete his/her degree
* confirmation that the completion timeline prepared by the student (above) is feasible
* recommendation for funding student
* discussion of other funding options that were considered and why they were not feasible
* any anticipated research expenses that may be incurred while the student completes his/her work and how these will be paid for
* any ability of advisor or department/program to provide stipend support, if applicable

1. A signed statement from the Department Head/Program Director confirming that no sources of funding are available from the department/program for the student's tuition, fees or health insurance during this final semester of his/her degree.

**Applications for Spring 2025 – Primary Application Window: December 6 through January 6. Late Applications may be reviewed through January 9, 2025, if budgets allow.**