

FELLOWSHIP APPOINTMENT DATA FORM

Fellowship Type: Presidential Moore

Person Number: _____ Social Security Number: _____

Mr. Ms. Mrs. Dr. Male Female

Name: _____
(Last Name) (First Name) (Middle Initial)

Email address: _____

Date of Birth: _____
(Month/Day/Year)

Ethnicity: _____
(see Ethnicity Codes at right)

Is the fellow an international student? Yes No

If yes, please check your visa type: F1 F2 J1 J2 H1B OTHER _____

Ethnicity Code
01 - Black
02 - Hispanic
03 - Puerto Rican
04 - Alaskan/American Indian
05 - Asian/Pacific
07 - White
08 - Other
09 - Unknown

NOTE: International students receiving Presidential or Moore fellowships will also be required to submit the [Nonresident alien scholarship/fellowship voucher form](#) and the [Request for scholarship/fellowship payment to a nonresident alien form](#) to 408 Capen Hall along with this form.

Home Phone Number: _____ Work Phone Number: _____

Address: _____
(Street)

(City) (State) (Zip Code)

DEPARTMENTAL INFORMATION:

Academic Department: _____ Faculty/School: _____

TA/GA Appointing Department: _____
(If different) (Please attach a copy of the student's Personnel Transaction form if available)

Checksort Code: _____ Amount to be paid by Graduate School \$ _____
Graduate School Cost of Education Allowance* \$ _____
Amount to be paid by appointing department \$ _____
Total amount of award \$ _____

Department Head Signature: _____

Dean Signature: _____

FOR GRADUATE SCHOOL USE ONLY:

Award Amount: _____ Pay Frequency: _____ Account Number: _____

Pay Period Begin: _____ Pay Period End: _____

*Available for select Nursing, Management and all Roswell Park Students. Note: These students must apply for reimbursement to the Graduate School for these funds by the end of the academic year.