



UNIVERSITY OF
TEXAS
ARLINGTON

OFFICE OF
GRADUATE STUDIES

Nomination Form

Summer 2023 Dissertation Fellowship

Students/Faculty: This form and all supporting documentation must be submitted to your College or School. Forms submitted directly to the Graduate School will not be considered. Please contact your department's Graduate Advisor for additional information and application deadlines.

TO BE COMPLETED BY NOMINEE:

Date

Student ID (1000#)

Name

(Last, First, MI

Email

Department

Dissertation Title:

Date of approval of dissertation proposal/prospectus:

Has all research needed to complete the dissertation been finished?

Yes

No

Please check either **YES** or **NO** to indicate whether you and your advisor are committed to assuring that you will graduate in the Summer 2023 Term. If you check NO, please indicate the month and year you expect to complete .

Non-US Citizens: To receive this Fellowship, all non-US citizens must apply for OPT or H1B status that starts no later than 60 days after the PhD is conferred or indicate that they will leave the United States shortly after graduating in the Summer Term. **In the space provided below** ,type **"Yes"** if you have applied or plan to apply for OPT or H1B status. Type **"N/A"** if you intend to leave the US.

Nominee Acknowledgment: I understand that the intent of this award is to provide financial assistance enabling me to complete the final stage of my doctoral studies. If I do not complete by my anticipated graduation date indicated above, I may not be eligible for financial support in the future unless unexpected problems or issues caused the delay. I further understand that:

1. The Fellowship **will not be renewed, extended, or delayed under any conditions.**
2. I can only receive the Dissertation Fellowship once.
3. I can hold no other forms of paid employment while a Dissertation Fellow.
4. I will enroll in at least 3 hours of dissertation research during the upcoming Summer Term.
5. The cost of tuition will be paid out of the Fellowship funds awarded.
6. That my department may not provide me further financial support if I do not complete my anticipated graduation term.

(Student Signature)

(Date)

TO BE COMPLETED BY THE NOMINATING DEPARTMENT: The nominee's Supervising Professor and Graduate Advisor support this student's nomination for a Dissertation Fellowship. The student was selected and ranked on a competitive basis with other nominees taking their academic accomplishments, potential for success and likelihood of completing an excellent dissertation. The nominee is in good academic standing and is prepared and approved to concentrate fully on dissertation work. We have carefully examined the student's proposal and progress to-date and believe the nominee will be able to complete and successfully defend the dissertation to graduate by the end of the Summer Term or in the following Fall or Spring Term. Failure to complete by the intended date of graduation specified in the application may end consideration for future financial support for this nominee unless extraordinary events delayed the student's completion. Finally, if the nominee is an international student, we have determined that he or she will have applied for OPT or H1B status to start after graduation or intends to leave the United States.

Supervising Professor:

Name

Email

Signature

Date

Graduate Advisor:

Name

Email

Signature

Date

Selection Committee Decision:

The Selection Committee of the this College or School nominates this student for a Dissertation Fellowship. He/she is currently enrolled, is in good academic standing and is fully prepared and approved to concentrate on completing his /her dissertation. After careful evaluation, we expect the dissertation will be completed and successfully defended by the end of the Summer, 2022 Term or in the following Fall or Spring Term. This nominee's dissertation work is well-advanced and is unlikely to be delayed by unexpected problems or unresolved issues with research or analyses. *We understand that the recipient may not be eligible for further financial support if he/she fails to complete and graduate by the intended date of graduation specified in the application.*

This nominee is ranked . out of

(Rank)

(Total number of Nominees)

Approval of the Chair of the College/School Selection Committee:

Name:

Email

Signature

Date