nanoMFG Node Broadening Participation Graduate Fellowship

at the University of Illinois

APPLICANT INFORMATION FORM

1) Applicant Name: __________________________

2) Current UIUC Graduate Student? Y/N ____________

   If yes:
   Department: _________________________________
   Date of Entry: ______________________________
   Research Advisor: __________________________
   Final degree being pursued (MS/PhD): __________

   If no:
   Have you have applied to Illinois for the admission to the graduate college for Fall 2020?
   Y/N ______________________________________________________________________
   In what department: _________________________________________________________
   Faculty Advisor Interest: ________________________________
   Final intended degree: ______________________________________________________

3) Racial or Ethnic identification (check all that apply)
   □ Native American or Alaska Native
   □ Native Hawaiian or Other US Pacific Islander (Guam or American Samoa)
   □ Black or African American
   □ Latino, Mexican-American, or Puerto Rican
   □ Another race or ethnicity not listed above

4) How would you currently describe your gender (select all that apply)
   □ Male
   □ Female
   □ Transgender
   □ Cisgender
   □ Genderqueer
   □ Another gender not listed above