

Foreign Language and Area Studies Fellowship Application Form Academic Year 2010-2011

Please check the box(es) corresponding to the Center(s)/Program to which you are applying for a FLAS Fellowship:

- Center for Latin American Studies
 Center for Russian and East European Studies
 Global Studies Program
 European Studies Center
 Asian Studies Center

Reminder: If you are applying to more than one Center/Program, you must submit separate applications for each Center/Program.

General Information

Name: Mr / Ms _____ E-mail: _____

Local Address: _____ Perm. Address: _____

Local Phone: _____ Perm. Phone: _____

Citizenship: US Citizen Permanent Resident Pitt PeopleSoft No. (if available) _____

Career Goals (check all that apply):

| | | |
|---|---|--|
| <input type="checkbox"/> Federal government | <input type="checkbox"/> Foreign government | <input type="checkbox"/> Higher education |
| <input type="checkbox"/> International organization (in US) | <input type="checkbox"/> Elementary / secondary education | <input type="checkbox"/> Private sector - for profit |
| <input type="checkbox"/> International organization (foreign) | <input type="checkbox"/> State / local government | <input type="checkbox"/> Private sector - non-profit |
| <input type="checkbox"/> US Military | <input type="checkbox"/> Unknown | <input type="checkbox"/> Other: _____ |

Academic Information

| | | | | | | | |
|---|--|---|---|---|---|---|--|
| <p style="text-align: center;">Undergraduate Information</p> <p>Institution: _____</p> <p>Major(s) and QPA: _____</p> | <p>Are you currently enrolled in the certificate program of the Center/Program that is offering the FLASF? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you applying for other types of fellowships (e.g. Mellon)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify: _____</p> | | | | | | |
| <p style="text-align: center;">Graduate Information</p> <p>Department / School: _____</p> <p><input type="checkbox"/> Master's student <input type="checkbox"/> Doctoral student</p> <p>Tuition Status: <input type="checkbox"/> In state <input type="checkbox"/> Out of state</p> <p>Enrollment Status: <input type="checkbox"/> Matriculated <input type="checkbox"/> Applying</p> <p>Will you be on campus during the award period? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain: _____</p> | <p style="text-align: center;">Language Information</p> <p>FLASF Target Language: _____</p> <p>Language Level for which award is sought:</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> 1st year</td> <td><input type="checkbox"/> 4th year</td> </tr> <tr> <td><input type="checkbox"/> 2nd year</td> <td><input type="checkbox"/> 5th year</td> </tr> <tr> <td><input type="checkbox"/> 3rd year</td> <td></td> </tr> </table> <p>Other languages you have studied and to what level completed: _____</p> | <input type="checkbox"/> 1 st year | <input type="checkbox"/> 4 th year | <input type="checkbox"/> 2 nd year | <input type="checkbox"/> 5 th year | <input type="checkbox"/> 3 rd year | |
| <input type="checkbox"/> 1 st year | <input type="checkbox"/> 4 th year | | | | | | |
| <input type="checkbox"/> 2 nd year | <input type="checkbox"/> 5 th year | | | | | | |
| <input type="checkbox"/> 3 rd year | | | | | | | |

The undersigned attests that the information contained in this application is true and complete

Student Signature: _____ Date: _____

----- Below to be completed by the School / Department -----

Printed name and e-mail address of departmental contact: _____

If the student is an applicant, has the student been admitted? Yes No decision yet Confirmed to attend Pitt? Yes No decision yet