



The Central New York-Puerto Rico Alliance for Graduate Education and the Professoriate (CNY-PR AGEP)

FELLOWSHIP APPLICATION FORM – Part 1

A. General Information

Name: _____ Student ID No. _____

Residential Address: _____

Mailing Address (if different): _____

Telephone numbers: Day _____ Night _____ Cell. _____

E-mail address: _____ Fax Number: _____

Gender: ____ Age: _____ Ethnic Origin: _____ (optional)

U.S. Citizenship: Yes () No () Permanent Resident: Yes () No ()

**Please specify if you are applying for any other fellowship program:

(For informational purpose only. This will not affect your evaluation for this award).

B. Educational/Academic Information

Current department and program: _____

Current GPA: _____ BS University: _____ BS GPA: _____

C. Previous Research Experiences: (Use additional pages)

Describe or include a résumé indicating:

1. Previous research experience.
2. List of publications and presentations, if any.
3. One page essay (Indicate your interests to pursue doctoral studies, your short and long term career plans).
4. Extracurricular activities (organizations, clubs) and special awards.

D. Additional Documents

The following documents should be submitted with your application in order to be considered:

1. Official transcripts from all undergraduate and graduate institutions
2. One letter of recommendation
3. Brief essay (half page) indicating future career plans

Send complete application documents to:

Dr. L. Antonio Estévez – AGEPI & PD
Department of Chemical Engineering
PO Box 9046
Mayagüez, PR 00681-9046

Telephone: 787 832 4040 Ext. 3256
Fax: 787-834-3655
Email: cnypragep@uprm.edu



**The Central New York-Puerto Rico
Alliance for Graduate Education and the Professoriate
(CNY-PR AGEPE)**

FELLOWSHIP APPLICATION FORM – Part 2

Reference Report on Applicant

1. Instructions: Print and have your reference fill out this form
2. Mail completed form before **September 12, 2008, 4:00 PM**
3. Please Send to:

Dr. L. Antonio Estévez – AGEPE PI & PD
Department of Chemical Engineering, PO Box 9046
Mayagüez, PR 00681-9046

Telephone: 787 832 4040 Ext. 3256

Fax: 787-834-3655

Email: cnypragepe@uprm.edu

Name of Applicant: _____

I (the applicant) do () do not () waive my right to see the completed reference report.

Signature of Applicant: _____

1. Name of Respondent: _____

2. Title and Department: _____

3. Institution: _____

4. Acquaintance with Applicant:

A. I have known the applicant for _____ years and _____ months.

B. I have known the applicant as a:

Student in class

Other (Specify):

Research student

Student in lab

Reference Report on Applicant- Page 2

C. Applicant's Overall Scientific Potential:

In comparison with a representative group or college students in the same field and at the same level, how do you rate the applicant's potential?

- Truly Exceptional:** .Equivalent to the very best you have known –
A person who in your opinion is rare; appearing maybe once every few years
- Outstanding:** Comparable to the best student in a current class (Highest 5%)
- Unusual:** Next Highest 10%
- Above Average:** Not in upper 15%, but definitely in upper 25%
- Average:** Probably capable of pursuing a career in science at the graduate level

Instructions: Please describe the applicant's abilities and his/her potential as a scientist (versatility, ability to make sound judgments, academic weaknesses, if any). Also comment, if possible, on the applicant's future career objective and interest in scientific research. You can use the space below, a separate page or address a letter.

Comments:

Signature: _____

Date: _____