

GEMS FELLOWSHIP APPLICANT INFORMATION FORM

Personal Information

Name: _____ email address: _____

Address _____ telephone: (____)-_____

city state zip code

For tuition purposes, UofL considers you to be: (circle one) In-state Out-of state

Are you a citizen, national, or permanent resident of the United States? _____

Educational History

Undergraduate Institution: _____ Graduation Date: _____
mo/year

Degree and Major _____ GPA: _____

Graduate Institution: _____ Entrance Date: _____

Department of Study: _____ Graduate GPA: _____

Briefly list any college honors, awards, affiliations, or activities:

Briefly describe any teaching experiences or youth-related activities (such as coaching) that may be important in evaluating your suitability for a GEMS Fellowship:

