

ACADEMIC APPLICATION GRADUATE EQUITY FELLOWSHIP PROGRAM CALIFORNIA STATE UNIVERSITY, LOS ANGELES

IMPORTANT:			
You must also file a financial application: a Free A Application (CADAA). The FAFSA form is available			
Have you previously received the Graduate Equit	y Fellowship? Yes	No	
If "yes" indicate first semester and year received	d:FallSpring Yea	 ar	
PERSONAL INFORMATION:			
Preferred Name:			
First	Last	Pronouns	
Name on Transcript			
(if different than preferred name):			
First	Last		
CIN:			
Permanent Address:			
Street	City	State	Zip
University E-mail Address:			
Phone Number:			
Area Number			
Citizenship Status: U.S. Citizen	Permanent U.S. Resident	CAR	esident
Ethnic Identity (optional):			
Disabled (Attached verification from the Office for S]	
EDUCATIONAL INFORMATION:			
Undergraduate Education Major:	Minor:		
School Attended (Please Check) C * If you did not receive your baccalaurea transcript.			

* Overall undergraduate G.P.A. Graduate Education Major

(Attach a copy of your graduate degree program)

Sem/Yr. Admitted

*Include a copy of your unofficial graduate transcript from Cal State LA *Overall Graduate G.P.A.

Expected date of graduation

Sem/Yr

Graduate Advisor Signature (this signature verifies that the application is in good academic standing)



LETTERS OF RECOMMENDATION

Please provide two sealed letters of recommendation (preferably a previous or current professor) with your application. Your application will not be processed without the letters of recommendation. Please print the names of those who will be submitting letters on your behalf below:

Print Name

Print Name

ESSAY

Please write a short essay (approximately 250 words) addressing (1) challenges you have surmounted in the course of your education, (2) elements of your educational or personal experience that have contributed to your interest in pursuing graduate study and to your motivation and determination to succeed in it, and (3) your career objective and abilities and skills you possess that will enhance your chances of success. (Please attach a separate sheet of paper.)

AUTHORIZED RELEASE

I authorize the Cal State L.A. Center for Student Financial Services to release transcripts, letters of recommendation, application, and accompanying documents and to publicize my award should I be a recipient.

Signature

Date _____

SUBMIT THIS APPLICATION AND ITS ATTACHMENTS VIA EMAIL TO GRADSTUDIES@CALSTATELA.EDU. INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED.

REV: September 2023