

**JACOB K. JAVITS FELLOWSHIP PROGRAM  
FINAL PERFORMANCE REPORT**

OMB No. 1840-0752  
Expires: xx/xx/xx

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**Section I: Grantee Information**

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Grant Number: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Program Coordinator: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Total Number of Jacob K. Javits fellowships originally awarded to the grantee institution in FY XXXX: \_\_\_\_\_

**Fiscal Data**

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Please enter data for each budget period and the budget for the project period.

	<b>Budget Period 1 FY XXXX</b>	<b>Budget Period 2 FY XXXX</b>	<b>Budget Period 3 FY XXXX</b>	<b>Budget Period 4 FY XXXX</b>	<b>Total Budget for Project Period FY XXXX-XXXX</b>
Federal Funds Awarded:					\$0
Federal Funds Expended:					\$0

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Federal Funds Remaining:						\$0
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**Section II: Individual Student Data**

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Please enter the requested data for each individual Javits fellow. If you have more than one fellow, please copy this worksheet by right-clicking on the tab below that says "Sec 2" and selecting "Move or Copy." Then, check the box that says "Create a copy" and select "move to end." Then click "OK." Do this as many times as necessary to create a sheet for each fellow.

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**General Information**

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**Fellow's Name:**

\_\_\_\_\_ *Last name, First name*

**Fellow's Gender:**

Male: \_\_\_\_\_

Female: \_\_\_\_\_

**Ethnicity:**

\_\_\_\_\_ Hispanic or Latino

\_\_\_\_\_ Not Hispanic or Latino

**Race:**

\_\_\_\_\_ American Indian or Alaska Native

\_\_\_\_\_ Asian

\_\_\_\_\_ Black or African American

\_\_\_\_\_ Native Hawaiian or other Pacific Islander

\_\_\_\_\_ White

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**Program of Study**

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**Fellow's Discipline (please select from the following approved fields of study):**

\_\_\_\_\_ Anthropology

\_\_\_\_\_ Archaeology

\_\_\_\_\_ Area Studies

\_\_\_\_\_ Art History

\_\_\_\_\_ Classics

\_\_\_\_\_ Communications and Media

\_\_\_\_\_ Comparative Literature

\_\_\_\_\_ Creative Writing

\_\_\_\_\_ Criminology

\_\_\_\_\_ Economics

\_\_\_\_\_ English

\_\_\_\_\_ Ethnic and Cultural Studies

\_\_\_\_\_ Folklore, Folk Life

\_\_\_\_\_ Foreign Language

\_\_\_\_\_ Geography

\_\_\_\_\_ History

\_\_\_\_\_ Less Commonly Taught Languages

\_\_\_\_\_ Linguistics

\_\_\_\_\_ Music

\_\_\_\_\_ Non-American History

\_\_\_\_\_ Philosophy

\_\_\_\_\_ Political Science

\_\_\_\_\_ Psychology

\_\_\_\_\_ Public Policy and Administration

\_\_\_\_\_ Religion

\_\_\_\_\_ Sociology

\_\_\_\_\_ Speech, Rhetoric and Debate

\_\_\_\_\_ Studio Arts

\_\_\_\_\_ Theater Arts

\_\_\_\_\_ TV, Film and Cinematography

**Terminal Degree Sought:**

\_\_\_\_\_

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**What is the fellow's current education status?**

- Is enrolled but not yet advanced to Ph.D. candidacy
- Has passed preliminary exams and advanced to Ph.D. candidacy
- Has received Ph.D.

**If fellow has received Ph.D., please specify the month and year of graduation:**

**Month:** \_\_\_\_\_ **Year:** \_\_\_\_\_

- Has withdrawn from his/her academic program prior to graduation
- Other (Please specify in comment box below)

*Comments:*

**If the fellow was employed part-time while receiving Javits fellowship funding, please indicate the type of employment:**

- Research Assistant
- Teaching Assistant
- Other (please specify): \_\_\_\_\_
- Not Applicable

**How does the fellow plan to finance his/her remaining graduate study if the Javits fellowship funding ended before the date of graduation?**

- Fellowship
- Scholarship
- Research Assistantship
- Teaching Assistantship
- Student Loans
- Employment (full-time or part-time)
- Other (please specify): \_\_\_\_\_

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**Is the fellow's post-graduate employment in a field that relates directly to his/her academic field of study, as funded by the Javits fellowship?**

- \_\_\_\_\_ Yes
- \_\_\_\_\_ No
- \_\_\_\_\_ Not yet graduated
- \_\_\_\_\_ Graduated; not yet found employment
- \_\_\_\_\_ Unknown

**Where did the fellow find employment after graduation (check all that apply)?**

- \_\_\_\_\_ Institution of higher education
- \_\_\_\_\_ Other educational institution
- \_\_\_\_\_ Federal, state or local government
- \_\_\_\_\_ Community-based/Non-profit organization
- \_\_\_\_\_ Research organization
- \_\_\_\_\_ Private Sector
- \_\_\_\_\_ International employment
- \_\_\_\_\_ Continued post-graduate study
- \_\_\_\_\_ Other (please specify): \_\_\_\_\_
- \_\_\_\_\_ Not Applicable (not yet graduated; not yet found employment)
- \_\_\_\_\_ Unknown

**Start Date of Graduate Study:** \_\_\_\_\_

**Start Date of Javits Fellowship:** \_\_\_\_\_

**End Date of Javits Fellowship:** \_\_\_\_\_

**Total Years of Javits Fellowship Funding:** \_\_\_\_\_

**Total Years of Graduate Study:** \_\_\_\_\_

**Fellow's Stipend and Financial Need**

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Financial need is determined each year on the basis of the requirements for need analysis prescribed by Title IV, Part F of the Higher Education Act of 1965, as amended. Please consult your institution's financial aid office for information or questions regarding the determination of financial need.

Please report the fellow's stipend, as determined by his/her financial need, for each budget period of the grant (Note: please indicate the stipend amount received by the student in that budget period; this may differ from the amount of stipend funding actually awarded by the Javits Fellowship Program to the institution for that fellow during the budget period, due to carry over of unused funds):

<b>Budget Period 1 (FY XXXX):</b>	
<b>Budget Period 2 (FY XXXX):</b>	
<b>Budget Period 3 (FY XXXX):</b>	
<b>Budget Period 4 (FY XXXX):</b>	
<b>Total for Project Period:</b>	<b>\$0</b>

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**Total Federal Funding**

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Please indicate the total amount of Javits fellowship funding received by your institution in each budget period for this fellow. In the "Stipend" column, please do not include funds carried over from previous years. Include only the funds awarded to you in that fiscal year/budget period.

Budget Period	Stipend	Institutional Payment	Total
1 (FY XXXX)			\$0
2 (FY XXXX)			\$0
3 (FY XXXX)			\$0
4 (FY XXXX)			\$0
<b>TOTAL:</b>	\$0	\$0	\$0

**DISCLOSURE OF BURDEN STATEMENT**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1840-0752 and the expiration date is xx/xx/xx. The time required to complete this information collection is estimated to average 6 hours per response, including the time to review instructions, search existing data resources, gather needed data, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate (s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, DC 20202-4651. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** The Jacob K. Javits Fellowship Program, U.S. Department of Education, 1990 K Street, N.W., Washington, DC 20006-8521.