

Application for Fellowship

Agency Disclosure Notice

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Privacy Act Statement

National Defense Science and Engineering Graduate (NOSEG) Fellowships are awarded under the authority of section 2191 of Title 10, United States Code. Information requested on application form, and fellows' progress reports is solicited under this authority. The application information may be disclosed to reviewers and assistants as part of the NOSEG process for evaluation and selection of qualified applicants. Information provided in applications and fellows' progress reports may be disclosed to academic institutions attended by applicants and fellows to provide or obtain data regarding the applicant review process, award decisions, or the administration of awards. Aggregated data based on application materials may be used in management reports designed to evaluate the direction and progress of the program as a whole and for reporting within the Department of Defense (DoD) and Federal Government. Attribution of specific data to individual applicants will be avoided, whenever possible, in using information provided. A fellow's application information may be shared with DoD laboratory personnel, for the purposes of receiving information about summer employment or other opportunities, only if an applicant consents to sharing of the application information using the check box within the application. A list of fellowship winners may be published.

Submission of the information requested on the application is voluntary. Omission of any particular item not necessary to establish eligibility will not preclude the application review, although failure to provide full and complete information needed to evaluate all or the merits of the application may reduce the possibility of receiving an award. In order to determine the degree to which members or diverse sections of the eligible population are aware of and apply for this program, completion of the demographic fields on the application relating to gender, ethnicity, and race, is requested, but voluntary; omission of any demographic field information will not affect award consideration. Applicants will be considered for award of fellowships based on merit and without regard to race, color, religion, national origin, gender, or age.

Application for Fellowship

Please complete all required fields (Note: The pre-doctoral fields are designed to capture education information for traditional applicants who have completed their Master's degree and will attend a different university for the PhD). If you will be attending the same institution, you may re-enter the graduate information in this section).

To trigger the reference link, click the "next" button. On the following page it will ask you to 'submit' your application. Upon submission you will receive an email with the reference link to forward to your recommenders (This happens the first time logging in ONLY). After submission, complete the EEO Information. If you do not receive the reference link, there is a reference form you can download from the NDSEG website. Please note, submitting your application does not mean it is FINAL. Applicants can log back in and update information.

You may login to the application to complete/update your information continuously until the application period closes. Just remember to click the save button to save your information. To log back into your application, return to the application portal on the website and login as a returning user.

CONTACT INFORMATION

Last Name

First Name

Middle Initial

CURRENT ADDRESS:

Address

Suite/Apt.

Country

City

State

Zip

Home Phone () -

Cell Phone

Email Address

Work/School Email Address

Date Address is Effective (Select Month) (Day) (Year)

PERMANENT ADDRESS

Street Address

Permanent Address Suite/Apt #

Permanent City

Permanent State

Permanent Country

CITIZENSHIP

US Citizen Yes No

If "NO", Country of Citizenship

Dual Citizenship? Yes No

Dual Country Name

EDUCATION

UNDERGRADUATE EDUCATION

Please list your undergraduate information

Undergraduate School Name

Undergraduate Country

Undergraduate City

Undergraduate School State

Undergraduate School Zipcode

Please list the start date of attendance at this institution

Please list the end date of attendance at this institution

Please list your Major in Undergraduate School

Please list your undergraduate minor

Please list your undergraduate second minor

Please list your overall GPA

Please list your major GPA

Please list the type of degree received (BA, BS, etc.).

Please list your first and last name when attending this institution (if different from your current name)

GRADUATE EDUCATION

Please list your graduate school information in this section

Graduate school name

Graduate School Country

Graduate School City

Graduate School State

Graduate School zipcode

Graduate School Start Date (this can be estimated)

Graduate School end date

Graduate School Major

Graduate School specialization

Graduate School GPA

Graduate Record Examination (GRE) Scores-General Test Only

Graduate School Degree Type (MA, MS, etc.)

Name when attending Graduate School (if Applicable)

PREDOCTORAL INSTITUTION (If different from Graduate School)

Please enter your Pre-doctoral Institution Information

Pre-doctoral Institution Name

Pre-doctoral Country

Pre-doctoral Institution City

Pre-doctoral Institution State

Pre-doctoral Institution Zipcode

Pre-doctoral Major

Pre-doctoral Degree Type Pursuing/received (PhD, MD, DPH, etc.)

Pre-doctoral GPA

Please list you name when attending the Pre-Doctoral Institution

Please list any additional education here.

ADD EDUCATION

School: <input type="text"/>	School Type: <input type="text" value="(Please Select a Value)"/>
Degree Type: <input type="text"/>	Major: <input type="text"/>
Begin Date: <input type="text"/>	End Date: <input type="text"/>
GPA: <input type="text" value="0"/>	

School: <input type="text"/>	School Type: <input type="text" value="(Please Select a Value)"/>
Degree Type: <input type="text"/>	Major: <input type="text"/>
Begin Date: <input type="text"/>	End Date: <input type="text"/>
GPA: <input type="text" value="0"/>	

ADVISOR INFORMATION

If known, please list your Advisor Information

Advisor First Name

Advisor Last Name

Advisor Email Address

Advisor Telephone Number

WORK HISTORY

Work Experience

ADD WORK HISTORY

Company Name:

Begin Date:

End Date:

City:

State:

Postal Code:

Job Title:

Supervisor Name:

Supervisor Email:

Supervisor Phone:

Rate Of Pay Start:

Rate Of Pay End:

Duties:

Reason For Leaving:

Company Name:

Begin Date:

End Date:

City:

State:

Postal Code:

Job Title:

Supervisor Name:

Supervisor Email:

Supervisor Phone:

Rate Of Pay Start:

Rate Of Pay End:

Duties:

Reason For Leaving:

Company Name:

Begin Date:

End Date:

City:

State:

Postal Code:

(Please Select a State)

Job Title: **Supervisor Name:**

Supervisor Email: **Supervisor Phone:**

Rate Of Pay Start: **Rate Of Pay End:**

Duties:

Reason For Leaving:

Licenses and Certificates

ADD LICENSING

License Name: **License Agency:**

License Number: **State Issued:**

Begin Date: **Expiration Date:**

Comments:

Foreign Language

Computer / Software Skills

Military Experience

ADD MILITARY

Branch: **Service ID:**

Location: **Start Rank:**

Discharge Rank: **Current Rank:**

Begin Date: **End Date:**

Address: **City:**

<input type="text"/>		<input type="text"/>	
State:	Postal Code:		
(Please Select a State) <input type="text"/>	<input type="text"/>		
Country:	Honors:	Disciplinary Action:	
United States of America <input type="text"/>	<input type="text"/>	<input type="text"/>	
Expertise:	Comments:		
<input type="text"/>	<input type="text"/>		

SOCIAL MEDIA

LinkedIn	<input type="text"/>
Facebook	<input type="text"/>
Twitter	<input type="text"/>

References

ADD REFERENCE

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Phone:	<input type="text"/>	Email:	<input type="text"/>
Relationship:	<input type="text"/>	Years Known:	<input type="text" value="0"/>

First Name:	<input type="text"/>	Last Name:	<input type="text" value=";asldkfja"/>
Phone:	<input type="text"/>	Email:	<input type="text"/>
Relationship:	<input type="text"/>	Years Known:	<input type="text" value="0"/>

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Phone:	<input type="text"/>	Email:	<input type="text"/>
Relationship:	<input type="text"/>	Years Known:	<input type="text" value="0"/>

PERSONAL STATEMENT

Personal Statement Upload: Should include the following. What are your short and long-term professional goals? How did these goals develop? How have you already begun to lay the foundation for these goals? How does this fellowship fit into these goals?

[Click Here To Upload File](#)

ADDITIONAL REQUIREMENTS

Essay/Proposal: Please provide the Title of your proposed research that would be relevant to the Department of Defense (DoD) - Please submit a proposal relevant to the DoD Agency (ONR,ARMY, AIRFORCE)/field that interest you. The reader should be convinced that your project will make an important contribution to the Agency and be a persuasive argument for why your project/proposed training deserves to be funded.

- Essay/Proposed Research Upload [Click Here To Upload File](#)
- Resume Upload [Click Here To Upload File](#)
- Transcript Upload [Click Here To Upload File](#)
- GRE Scores Upload [Click Here To Upload File](#)
- Additional Upload 3 [Click Here To Upload File](#)

Applicant's Statement

I certify that the facts contained in this application are true and complete. I understand that, if selected for a fellowship, falsified statements on this application shall be grounds for immediate cancellation of the fellowship. I authorize investigation of all statements contained in this application as may be necessary in arriving at a fellowship decision. I authorize my employers, and references to give any and all information they may have concerning my previous employment and any pertinent information they may have otherwise to Solutions Through Innovative Technologies, Inc. (STI-TEC) and I release all parties from all liability for any damage that may result from furnishing same.

Disclosure and Release

In connection with my application for the National Defense Science and Engineering Graduate Fellowship (NDSEG) program, I understand that consumer reports, including investigative consumer reports, which may contain public record information, may be obtained as part of the pre-fellowship background investigation, or at any time during my fellowship. These reports may include, the following information; academics, performance evaluation, employment history, attendance, character, credit history, names and dates of previous employers, reason for termination of employment, work experience, accidents, etc. I further understand that such reports may contain public record information concerning my driving records, worker's compensation claims, bankruptcy proceeding, criminal records, etc., from federal, state and other agencies. I hereby release any person, agency, organization, or institution, including National Defense Science and Engineering Graduate Fellowship (NDSEG), Department of Defense (DoD) and Solutions Through Innovative Technologies, Inc. (STI-TEC), (STI-TEC), from any and all liability whatsoever resulting from this inquiry. This release is binding, now and in the future, on my heirs, assigns, associates, and personal representative(s) of any nature.

APPLICANT'S STATEMENT

I AGREE TO THE ABOVE STATEMENT

I AGREE

I AGREE TO THE ABOVE DISCLOSURE AND RELEASE

APPLICANT NAME:

DATE:

(Select Month) ▾	(Day) ▾	(Year) ▾
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SAVE