**FACULTY SPONSOR APPLICATION**

**Faculty Sponsor Form**

(To be completed by the Faculty Sponsor)

## Faculty Sponsor Information

Faculty Sponsor Name:

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Campus:       Department:

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Telephone: (     )       Email:

|  |  |  |
| --- | --- | --- |
| Please include area code |  |  |

Name of Faculty Sponsor: \_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Faculty Sponsor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_

1. May we share your name and contact information with faculty at doctoral-granting institutions who may be interested in calling you about this student? [ ]  Yes [ ]  No
2. Will you be on leave for any part of the 2017-18 academic year? [ ]  Yes\* [ ]  No

\*If Yes, please describe where you will be, the length of time you will be gone, and arrangements you plan to make to maintain contact with the applicant. (Faculty sponsors are expected to serve in that role throughout the award year.)

Comments: