

APPLICANT'S LAST NAME

FIRST NAME

SOCIAL SECURITY NUMBER OR DATE OF BIRTH

# T FELLOWSHIP PROGRAM

# 2007 APPLICATION FORM



**T Fellowship Program**  
c/o Columbia University Theatre Arts Division  
2960 Broadway, mc 1807  
New York, New York 10027  
<http://www.tfellowship.com>

**TO THE APPLICANT:** The information you provide on this form becomes part of your permanent record with both Columbia University and the T Fellowship Program. If it is not completed accurately and legibly, we will be unable to process your application. **Please complete the form using Adobe Reader if possible; otherwise please TYPE or PRINT legibly in pen only.**

**DEADLINE FOR APPLICATION: FEBRUARY 1, 2007**

1. LAST NAME (FAMILY NAME) FIRST NAME (GIVEN NAME) MIDDLE NAME

Please print here any variations of your name appearing on other records

2. Date of Birth (MM/DD/YYYY) \_\_\_/\_\_\_/\_\_\_

3. SEX  Male  Female

4. Mailing Address STREET ADDRESS LINE 2 (if necessary)

CITY STATE ZIP CODE COUNTRY

( ) ( )

DAY PHONE EVENING PHONE EMAIL ADDRESS (required)

5: Citizenship:  U.S Citizen  U.S. Permanent Resident (Green Card Holder)

Please note that applicants must either be United States citizens or have permanent resident status.

6. Please list the names of those from whom you have requested letters of recommendation.  
Full Name Title Institution/Organization

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7. Previous Education. List all places and dates of study at undergraduate\*, graduate\* and certificate levels.

Name of Institution	Location	Dates of attendance	Degree	Date of degree

\*Transcripts are required for all undergraduate and graduate institutions. Please attach additional pages if more space is needed.

8. How did you learn about the T Fellowship Program? \_\_\_\_\_

9. Please check off only those items included in this packet; do not check off items sent separately by you, educational institutions, or your recommenders.

- |   |   |
|---|---|
| <input type="checkbox"/> Application Form<br><input type="checkbox"/> \$100 Application Fee<br><input type="checkbox"/> Official Transcripts*<br><input type="checkbox"/> Three Letters of Recommendation*<br><input type="checkbox"/> Resume | <input type="checkbox"/> Autobiographical Essay<br><input type="checkbox"/> Statement of Objectives<br><input type="checkbox"/> Essay(s)<br><input type="checkbox"/> Proof of US Citizenship or green card<br><input type="checkbox"/> Additional Creative Materials (optional) |
|---|---|

**\*IMPORTANT:** As discussed in the Application Instructions, whenever possible, transcripts and recommendations should be included along with all other application materials in this packet. If you must send transcripts or recommendations under separate cover, they must be postmarked **NO LATER** than the deadline.

10. **To be read and signed by all applicants.** I declare that to my knowledge the information reported on this form is complete and accurate.

\_\_\_\_\_  
SIGNATURE DATE

If you would like your additional creative materials (e.g. binders, clippings, etc.) returned, you must include self-addressed packaging (envelope, box, etc.) with appropriate postage, or your materials will not be returned. The T Fellowship Program cannot be responsible for loss of or damage to materials. Please note that if you are awarded a Fellowship, your materials will be retained by the Program.

Applications must be postmarked no later than **FEBRUARY 1, 2007** and should be addressed to:

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 New York, New York 10027