Access and Diversity Graduate Scholarship Nomination Form

College: _____ Semester: _____

Department: _____ Graduate Coordinator: _____

Instructions: List all students for all sites on one form *in priority order*. Use additional sheets as needed.
**Nomination forms must be received by the Office of Graduate Studies at least 2 weeks prior to the beginning of each semester.

Student ID Number	Name	First Gen College Student?	Degree Program or Major	Site	I or C: Initial or Continuing	F=Fall Sp=Spring Su=Summer F&S=Fall & Spring	Hours Requested: 3 or 6	Graduate Studies use only Scholarship Award	
								Amount Awarded	Term(s)

Graduate Coordinator Signature: _____ Date Submitted: _____

Dean of Graduate Studies Approval Signature: _____ Date Approved: _____

Revised January 2020