

GENERAL EDUCATION BOARD

(7 pages)

PERSONAL HISTORY RECORD AND APPLICATION FOR SCHOLARSHIP

(Note: Please type or print all entries)

Field of Special Interest.....

.....  
Date.....

Name in Full..... Sex.....

Present Address.....  
(Street and Number) (City) (State or Country)

Permanent Address.....  
(Street and Number) (City) (State or Country)

Place of Birth..... Date of Birth..... Race.....

Citizenship..... Nationality.....

Single, married, widowed, divorced..... Wife's name.....  
(Form of customary legal signature)

Date of marriage..... Number of Children..... Age and Sex.....

..... Other dependents.....

If at present employed, indicate position and annual salary.....

What part, if any, of this salary will be continued if a scholarship is granted?.....

Do you qualify for any form of state aid for graduate study?.....

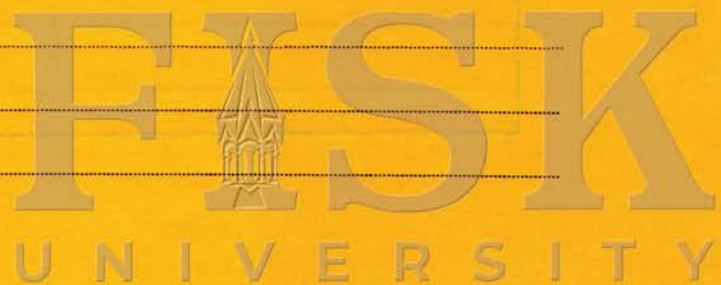
If not, please explain.....

Do you expect income from any source other than this requested scholarship?.....

If wife (or husband) is employed, give position and annual salary.....

Have you at any previous time filed an application with the General Education Board or The Rockefeller Founda-  
tion?..... If so, give details.....

Have you at any time held a scholarship from any other American institution or agency or are you now an applicant  
for one?..... If so, give details.....



Have you any constitutional disorder or physical defects?.....

(Applicants may be asked to submit to a medical examination)

**TRAINING:**

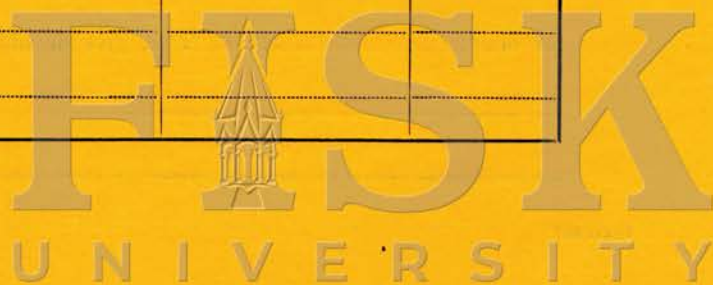
Type	NAME OF INSTITUTION	First and last years spent there	Degrees	Date
Undergraduate				
Graduate				
Special Study (In addition to that stated above)				

Please attach official transcripts of scholastic records (undergraduate and graduate) or have them sent directly to the General Education Board.

**EXPERIENCE:**

Positions held (teaching, scientific, professional, administrative, business)

INSTITUTION OR ORGANIZATION	Title of Position	Years of Tenure	Annual Compensation





**STUDY PLANS:**

What subject or subjects do you wish to study?.....  
(It may be desirable to describe in detail on a separate sheet the work you propose to do)

.....  
.....

What special studies or experience have you already had in these subjects?.....

.....  
.....  
.....

In what institution\* and with whom do you wish to work?.....

.....  
.....

When do you wish to begin work?.....

What period of appointment do you wish (in months)?.....

Exactly what tuition or laboratory fees will be required during this period?.....

Will any members of your family accompany you?.....

Who?.....

**EMERGENCY ADDRESSES: (Give names of nearest relatives or other emergency address)**

Name..... Relationship.....

Address.....

Name..... Relationship.....

Address.....

.....  
**Signature**

**Signatures of Sponsors:**

Proposed by:..... Address.....

Seconded by:..... Address.....

\* Submit a statement from the institution or individual with whom you wish to work, giving assurance that you will be admitted and that your plan of work is satisfactory to your proposed advisor or major professor.

