

Robert Penn Warren Center for the Humanities
2010-2011 GRADUATE STUDENT Fellowship Application

DIRECTOR OF GRADUATE STUDIES RECOMMENDATION FORM

Applicant Name: _____

Department: _____

DGS Name: _____

Please supply the GPA of the applicant as of January 2010: _____

Has the student completed his/her qualifying exams? Yes: ____ No: ____

The students who receive dissertation-year fellowships from the Warren Center are expected to defend their dissertations by the end of the summer of the grant period. Is it your opinion that the applicant will be able to defend by August 30, 2011?

Yes: ____ No: ____

The selection committee is not requesting a letter of recommendation from the DGS. Please feel free to add a brief comment on the applicant below (OPTIONAL).

DGS SIGNATURE

DATE

**Please return this form directly to the Warren Center by campus mail to:
VU Station B #351534**



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