

## Doctoral Completion Award

**Applicants will also need to submit a ROSI printout of their transcript, CV (3 pages maximum) & Completed [Financial Need Assessment Form](#)**

To be completed by the applicant

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Student # \_\_\_\_\_

Did you interrupt your studies at any time to take a leave?      No      Yes

I will begin my first non-funding year on:      May \_\_\_\_\_      September \_\_\_\_\_      January \_\_\_\_\_

List any financial support you expect to receive during the first 12 months of your non funded year.  
Include fellowships, grants, external awards, TA, RA or other stipends.

- |                   |                   |
|-------------------|-------------------|
| 1. _____ \$ _____ | 3. _____ \$ _____ |
| 2. _____ \$ _____ | 4. _____ \$ _____ |

PLEASE ANSWER THE FOLLOWING USING THE SPACE PROVIDED; PLEASE DO NOT ATTACH ANY MATERIALS OTHER THAN THOSE REQUESTED.

1. Estimate and describe the amount of work remaining to be done and the expected date of completion. Provide a planned timeline and give reasons for any request for more than 2 terms (8 months) of support.

Applicant's Signature: _____	CV attached (3 page maximum)
Date: _____	ROSI Printout of Transcript
	Completed OSOTF Form