

# AAFCS Graduate Fellowship Application

This application form is for the following four graduate fellowships:

- Jewell L. Taylor (up to 1): \$5,000 for graduate student pursuing a degree in family & consumer sciences=
- Mary Josephine Cochran (up to 1): \$5,000 for graduate student pursuing a degree in clothing and textiles.
- Mildred B. Davis (up to 1): \$5,000 for student with clearly defined plans to major in nutrition at the graduate level immediately following completion of the baccalaureate program.
- Ellen H. Richards Memorial (up to 1): \$5,000 for family and consumer sciences graduate student to support study and related experiences to prepare for administration and leadership roles.

Read the full guidelines at <https://www.aafcs.org/resources/recognition/fellowships>. Then, when you are ready to apply, 1) email your completed PDF application to [awards@AAFCS.org](mailto:awards@AAFCS.org) and 2) submit this form. Please do not submit this form until your PDF application has been submitted.

\* Required

1. Email address \*

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2. I am applying for the following graduate fellowship (choose one only): \*

*Check all that apply.*

AAFCS Jewell Taylor National Graduate Fellowship. I have read the guidelines and submitted my application packet to [awards@AAFCS.org](mailto:awards@AAFCS.org).

AAFCS Mary Josephine Cochran National Graduate Fellowship. I have read the guidelines and submitted my application packet to [awards@AAFCS.org](mailto:awards@AAFCS.org).

Mildred B. Davis National Graduate Fellowship. I have read the guidelines and submitted my application packet to [awards@AAFCS.org](mailto:awards@AAFCS.org).

Ellen H. Richards Memorial National Graduate Fellowship. I have read the guidelines and submitted my application packet to [awards@AAFCS.org](mailto:awards@AAFCS.org).

## Applicant Contact Information

3. My name is (Last, First): \*

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4. Address \*

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5. Address 2

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6. City/Town \*

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7. State/Province (2 Letter Abbreviation) \*

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8. Zip/Postal Code \*

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9. Preferred Email Address \*

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10. Daytime Phone Number \*

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11. AAFCS Membership ID Number if applicable; non-members are eligible to apply. Members receive extra points on evaluation rubric based on length of membership at time of application. Membership will be verified by AAFCS.

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12. The following describes my family and consumer sciences program enrollment status: \*

*Mark only one oval.*

Applicant is currently enrolled in a graduate program that meets the subject matter eligibility requirements will continue into the 2021-22 academic year.

Applicant has been admitted to a graduate program that meets the subject matter eligibility requirements will continue into the 2021-22 academic year.

Applicant has applied for admission to begin graduate study that meets the subject matter eligibility requirements for the 2021-22 academic year.

13. Name of school to which applicant has applied or been admitted: \*

\_\_\_\_\_

14. Field of study/major and degree that is being sought: \*

\_\_\_\_\_

15. Anticipated date of graduation (month/year): \*

\_\_\_\_\_

16. I agree to notify the Awards and Recognition Committee of the American Association of Family & Consumer Sciences (AAFCS) of any change in the information given in this application. I understand that all requirements must be met in order for this application to be considered. In addition, I understand that my application will be evaluated with all applications submitted based on the stated criteria and that I am not guaranteed any kind of financial assistance. I certify that the information given in this application is complete and accurate to the best of my knowledge, and I agree to comply with necessary regulations as specified in the AAFCS Awards, Grants, Fellowships, and Scholarship Programs. \*

*Check all that apply.*

Yes, I agree to the above statements.

