



Michigan Department of Career Development

KING-CHAVEZ-PARKS INITIATIVE

Future Faculty Fellowship (FFF) Program Application

Please type (or print legibly)

Name: (Last) (First) (Middle) US Social Security Number

Mailing Address: Permanent Address: (Street and Number) (City) (State) (Zip Code)

Fax Number: () E-mail Address:

State in which you claim residency: Are you a permanent resident of the United States? Yes No

Are you a U.S Citizen? Yes No

Race/Ethnicity (check one):

- (1) American Indian/Alaskan Native (2) African American/Non Hispanic (3) Hispanic/Hispanic American (4) Multiracial (Specify)

Birth Date: Month / Day / Year Sex: M F

Program of Study Program Level Term Proposed Enrollment degree title area of concentration ME MS PhD Fall 20 Spring 20 Summer 20

Please provide the following:

- a 1-2 page statement of purpose as it applies to the King-Chavez-Parks Fellowship goals. a copy of your transcripts 1-2 letters of recommendation, please name your references below.

Name Title Phone Number

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