Fulbright U.S. Student Program Campus Registration Form

Name: __________________________________________________________________________________________________________

School: ___________________________ Major(s)/Minor: ___________________________

Expected date of graduation: __________________________ Current cumulative GPA: ___________

Email address: ___________________________ Phone: ___________________________

Country to which you plan to apply (if undecided, list prospects): ___________________________

Have you attended a Fulbright Information Session?
Yes (list date): __________ No: __________

Names of Faculty Members Who Will Recommend You
The Fulbright requires three letters of reference. Please list below who you plan to write on your behalf:

1) ________________________________________________________________________________________________________
2) ________________________________________________________________________________________________________
3) ________________________________________________________________________________________________________

Names of Who Will Advise You on Country & Field Specific Expertise:
Not necessarily a letter writer, but someone who can provide advice and recommendations for your chosen country.

1) ________________________________________________________________________________________________________
2) ________________________________________________________________________________________________________
3) ________________________________________________________________________________________________________

Proposed Project – one page
On a separate page, describe your Fulbright research project. If you are applying for an ETA grant, explain your reasons for applying for a Fulbright to the country you have chosen and why you would like to teach English there.

Languages: List all the languages you speak and at what level (beginner, intermediate, advanced, fluent)

1) ________________________________________________________________________________________________________
2) ________________________________________________________________________________________________________
3) ________________________________________________________________________________________________________

Complete this form and return it via email by JUNE 12, 2015 to cmu-fulbright@andrew.cmu.edu.