

The Ohio State University
Arts Policy & Administration Program
Application for Barnett Fellowship

Personal Data:

Last Name _____ First Name _____ Middle Initial _____

Date of Birth _____ Sex _____ Female _____ Male
month/day/year

Present mailing address

Number	Street	Apartment
_____		_____
City	State/Country	Zip/Postal Code
_____	_____	_____
Present Phone (home) _____ (work) _____		
Present fax number, if you have one: _____		
E-Mail address, if you have one: _____		
Address valid until when? mo _____ day _____ year _____		

Permanent mailing address

Number	Street	Apartment
_____		_____
City	State/Country	Zip/Postal Code
_____	_____	_____
Present Phone (home) _____ (work) _____		

Financial Status:

Present occupation (if other than student): _____

Marital status: _____ single _____ widowed _____ divorced _____ married

Do you have dependents? _____ Yes _____ No If so, how many? _____

Do you receive financial assistance from parents or relatives? _____ Yes _____ No

If so, what is the total yearly amount of this assistance? _____

Certification of Truth Statement: Please read the following and sign and date below.

I affirm that the information I have provided on this application form and any additional materials that I submit related to the Arts Policy and Administration Program is complete, accurate, and true to the best of my knowledge. I agree that as a student, I will be subject to The Ohio State University Code of Student Conduct. I also understand that furnishing false information may result in revocation of my financial aid or may result in disciplinary action pursuant to the Ohio State University Code of Student Conduct.

Pursuant to the Family Educational Rights and Privacy Act of 1974, as amended (FERPA), I hereby authorize The Ohio State University to release the scholarship application information provided by me, as well as other official and unofficial Ohio State information regarding my academic progress and status, to scholarship donors for the purpose of providing the donors with information concerning my eligibility as a scholarship recipient.

(Applicant's legal signature)

(Date)

Include with your application materials or send separately to:

Graduate Studies Committee Chair
Department of Arts Administration, Education and Policy
1813 N. High St.
231 Sullivant Hall
Columbus, OH 43210

Deadline: January 5