LESLIE A. ROSE DEPARTMENT OF MECHANICAL ENGINEERING DOCTORAL FELLOWSHIP APPLICATION

To submit the fellowship application, email this PDF to mechanical.engineering@sdsmt.edu.

Date:							
Name:				S	Student ID#: _	-	
Local mailing address:							
City:	State	e:	_ Zip:		_		
South Dakota Residency Status							
Semester you received/expect to receive	your mast	er's degre	e (e.g. Fall	2021)			
Are you an international student?	Yes	No					
Master's Degree Advisor							
Provide a list of any works you have publis	hed or sub	omitted. In	clude full b	ibliographic	information.		
Summarize your doctoral research topic ar	nd objective	es.					
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Summarize your career goals and objectives.						
Provide a summary of your research activities and master's program contributions.						
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