

**Department of Psychological and Brain Sciences, Indiana University
Graduate Student Application
for Departmental Support After the Fifth Year in Program**

Due Date: April 1*

Submit to Academic Services Coordinator

****2017: April 1 falls on a Saturday, therefore, applications will be accepted until April 3, 2017.***

PBS support for graduate students is guaranteed only for the five years after a student enters the program. In the sixth year or beyond, there is *no guarantee* of department funding and such decisions involve consideration of many issues, including the department budget and administrative issues, student progress and all of the issues assessed below. Students who wish to seek such funding for their sixth year (or beyond) must complete this application by April 1st in the preceding spring. Decisions regarding funding of advanced students will be made by the department Chair, in consultation with the Directors of Graduate and Undergraduate Studies and other faculty, as deemed necessary by the Chair. Please note that *each year* you request extended department funding, a new application must be submitted. Submit the following application and required information **to the Academic Services Coordinator (Patricia Crouch) by April 1**. *2017: April 1 falls on a Saturday, therefore, applications will be accepted until April 3, 2017.*

Please print or type.

Name of Applicant: _____

University ID#: _____ **IU Email:** _____ **Date :** _____

In the upcoming academic year, I am seeking department funding for:

_____ Fall semester only _____ Spring semester only _____ Both semesters

Note: Receiving funding for Fall, Spring, or both semesters does not guarantee summer funding.

The upcoming academic year will be my _____ (6th, 7th, etc.) year in the program, as I entered the program in _____.

Double majors who added PBS as a second major must list the date in which they entered *any doctoral program* at Indiana University (e.g., the year they entered the Cognitive Science or Neuroscience program), *NOT* the year they added PBS as a second major.

If you ever had one or more ***official leave(s) of absence***, please still list, above, the year you started the program, but indicate here when your leave(s) was/were: _____

_____ **Attached is my timeline for completing my dissertation and degree, as approved and signed by my advisor.** Please be aware that the DGS or Department Chair may check on your progress throughout this spring and summer and next year, to verify that you are on track with your timeline. Failing to make progress as proposed in your timeline may result in your loss of department funding the following semester. Thus, please be realistic, but ambitious in your plans.

_____ **Advisor's Letter of Support for Application has been Emailed.** In addition to approving and signing the attached timeline for program completion, your advisor must ***email the DGS and Academic Services Coordinator*** giving his/her approval of your request for department funding and an

explanation of why such funding is necessary for your progress in the program. Please note that, in addition to your advisor, other members of your advisory or research committee may be consulted regarding their support for your request and their evaluation of your progress in the program and your plans to finish the program in a timely manner.

Other possible sources of funding:

It is possible that I will obtain other funding for next year (e.g., pending fellowship applications, grant funding from your advisor**):

_____ Yes _____ No

If yes, I should hear about whether or not I will receive other funding by: _____

**If you believe that your advisor might fund you (e.g., from a research grant), please discuss that with your advisor and ask your advisor to let the DGS and Academic Services Coordinator know that directly.

Indicators of progress in the program:

I have *officially been nominated/advanced to candidacy* (form filed):

_____ Yes _____ No

If No: I will be nominated for candidacy by: _____

I have *officially formed a dissertation Research Committee*, including having a committee proposal meeting and submitting my Research Committee Form and proposal abstract to the university:

_____ Yes _____ No

If No: I will do so by: _____

Teaching:

_____ I am willing to teach a course (i.e., be the instructor of record rather than a teaching assistant) if my department funding is contingent upon accepting such a position:

_____ Yes _____ No

If yes, please list all of the courses you believe you could teach:

Please note that teaching assignments will be made by the department and your past teaching evaluations (e.g., student evaluations for P211) will be considered.

Past funding:

I have received _____ years of funding from the department.

If you have not received continuous funding from the department, please list the semesters in which you had other funding and what those sources of funding were:

Additional Comments: Please tell us anything else that you believe may be relevant to why you are requesting extended funding from the department:

Timeline for Completing Dissertation and Degree

Please be as detailed as possible, so your advisor and others can determine the feasibility of your plans. For example, include months and dates for completing tasks and list specific tasks (e.g., having proposal or defense meeting, collecting data, analyzing findings, having introduction or methods or results section written, etc.):

The rest of this spring, I will accomplish:

This summer, I will accomplish:

Next fall, I will accomplish:

If applicable, next spring, I will accomplish:

I plan to defend my dissertation by: _____

If applying for a second year (or beyond) of funding past the fifth year, have you met the *timeline you set last year?*:

___ Yes ___ No

If No, why not:

This plan is **approved by the student's advisor, as verified here:**

Advisor's Printed Name

Advisor's Signature

Date

For Office Use Only: ___ application ___ timeline (___ approved by advisor) ___ received emailed letter of support from advisor