Wellesley College Dept. of Economics Peggy Howard Fellowship Application

THIS APPLICATION MUST BE RECEIVED BY APRIL 15

Date: Wellesley College Class:		_
Name:		
Address:		
Email Address:		
Current academic institution or bu	usiness affiliation:	
Academic program for which Fell		
Name and Address of institution:		
Name of program and degree pu		
Dates of attendance and expected	date of completion:	
Financial Information: Tuition, fe		
Other anticipated expenses (include	de living expenses):	
Funds available and sources:		

Thy have you chosen to pursue this program of graduate study? How will your graduat udies help you reach your future career goals?
ames of one or two references at Wellesley:
LEASE SEND COMPLETED FORM TO: Karen Cronin at kcronin2@wellesley.edu