

# CLAS DISSERTATION WRITING FELLOWSHIP DGS REPORT

Name of CLAS Dissertation Writing Fellowship Recipient	
Department	
Academic Year of Fellowship	

Please check the box that applies:

The recipient graduated in the spring semester of the academic year in which they received the award.

The recipient did not graduate in the spring semester of the academic year in which they received the award because of unforeseen delays of a personal nature that have been addressed through Human Resources.

The recipient did not graduate in the spring semester of the academic year in which they received the award because of unforeseen delays in research or writing. **If the recipient did not graduate because of unforeseen delays in research or writing, please describe those delays below and indicate when the recipient expects to finish.**

DGS Signature: \_\_\_\_\_

Date: \_\_\_\_\_

