



Sciences
Engineering
Medicine

**FORD FOUNDATION FELLOWSHIPS
RENEWAL VERIFICATION FORM**

To: Faculty Adviser

By my signature below, I affirm that Ford Foundation Predoctoral Fellow

(Name of Ford Fellow)

is making satisfactory progress and is in good standing

in the field of _____
(Program of Study)

in the department of _____.
(Department)

The Ford Fellow is eligible to continue in a PhD or ScD program and will be enrolled full-time for
the **2023-2024 academic year** at

(Name of Institution)

If this is not the case, please enclose an explanation.

Adviser Name: _____

Adviser Title: _____

(Signature of Adviser)

(Date)

Please return this form to the Ford Foundation Fellow and/or send a scanned copy to the National Academies of Sciences, Engineering, and Medicine Fellowships Office at FordAwards@nas.edu.