

Affiliated Postdoctoral Fellow/Graduate Student Sponsoring Faculty Form

EMPL ID (if applicable)

The University of Texas at San Antonio

If this is a Postdoctoral Fellowship or a Competitive Graduate Student Fellowship that is valued at a total of \$10,000 or more annually complete this form and attach it along with the POI form to the eForm.

Date

Please Print or Type

Postdoctoral Fellow/Graduate Student

Last Name First Name Middle Name

E-mail address for the Postdoctoral Fellow/Graduate Student

Department or College

Name or Type of Fellowship

Yearly Amount of Fellowship

Sponsorship

Begin Date of Fellowship Sponsorship

End Date of Fellowship Sponsorship

Name of Sponsoring Faculty Member

Sponsor EMPL ID

X

Signature of Sponsoring Faculty Member

Date

Department

Contact Name

Contact Phone

Contact E-mail Address

This form must be included with the [Person of Interest form](#)