

**Center for Afroamerican and African Studies**  
**Du Bois - Mandela - Rodney Post-Doctoral Fellowship Application Form**

Name: \_\_\_\_\_  
                    Last                                    First                                    Middle

Current Address: \_\_\_\_\_  
                                    City                                    State/Country                                    Zip/Postal Code

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place/Country of Birth: \_\_\_\_\_

Gender:      Male      Female     Race: \_\_\_\_\_

Year Ph.D. Awarded: \_\_\_\_\_

Degree-granting Institution: \_\_\_\_\_

Current Institution: \_\_\_\_\_

Your Area of Specialization: \_\_\_\_\_

Title of Proposed Project: \_\_\_\_\_

Abstract of Proposed Project:

Letters of Recommendation have been requested from:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Contact Information (List the name, address, phone number, and email address of someone who will know how to contact you):

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

By printing my name above, I hereby certify that the information reported on this application is correct to the best of my knowledge.

Please email the application to V. Robin Grice at: [gricer@umich.edu](mailto:gricer@umich.edu)

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Center for Afroamerican and African Studies  
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Ann Arbor, Michigan 48109