

ECE PhD Student Funding Information

Please use **one form for each student** and provide information on how you plan to support (fund) the student year by year for the duration of their studies.

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|----------------------|-----------------------|--|
| Advisor Name: | Today's Date: | |
| Student Name: | Admitted term: | |

| Year number | Academic Year (e.g. FA 2024-SP 2025) | Source of Funding: e.g. Presidential fellowship, GTA, GRA, student's own funds etc. | Health insurance coverage source: The Provost Office covers the health insurance expenses for the first three years of assistantship appointments. After the first three years, if the student will be appointed as a GTA, the health insurance expenses will need to be covered by the advisor's indirect account, not grant account. |
|--------------------|--|--|---|
| 1yr PhD student | | | |
| 2yr | | | |
| 3yr | | | |
| 4yr | | | |
| 5yr | | | |
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Please give here any additional information / comments related to your plans for supporting the student:

Please Comment on student's command of the English Language, both written and oral (for GTA only):