

Governor's Teaching Fellow KSU Application

First Name: _____ Last Name: _____

College: _____ Department: _____

Applicant Signature

Date

Supervisor/Chair/Director: Please tell us briefly why this applicant would be a great Governor's Teaching Fellow at this link: [Supervisor/Chair/Director Recommendation](#)

By completing the recommendation linked above and signing below, I support the above faculty member in their application for the Governor's Teaching Fellow program.

Supervisor/Chair/Director Name

Sharing Supervisor/Chair/Director Name
(for jointly appointed faculty only)

Supervisor/Chair/Director Signature

Date

Joint Supervisor/Chair/Director Signature

Date