



Diversifying Higher Education Faculty in Illinois
2019-2020 New Applicant Preliminary Questionnaire
REQUIRED FOR NEW APPLICANTS

1. Are you related to anyone currently serving on the DFI Board or anyone affiliated with the DFI Program? Yes ___ No ___

2. Dates of Illinois residency February 2015 – February 2018? Yes ___ No ___

3. Do you have a documented financial need? Yes ___ No ___
 - a. Will you receive assistance from your employer? Yes ___ No ___
 - b. Will you seek additional scholarship sources? Yes ___ No ___

4. Will you be a full-time employee while attending school? Yes ___ No ___

5. Will you be attending school full-time? Yes ___ No ___

Signature _____

Date _____

***Please turn this form in with your completed DFI application.**