



Wallace Stegner Fellowship Program

Creative Writing Fellowships • Stanford University • Application Form



INSTRUCTIONS: Fill out and return both sides of this application form, along with all supporting documents and an **application fee of \$75** in the form of a check or money order made payable to Stanford University. Do not send cash. **Your application must be postmarked no later than December 1.** Please **send all documents in one envelope**; do not send checks or manuscripts separately from your application.

- MALE
 OTHER
 FEMALE
 DECLINE TO STATE

LAST NAME	FIRST NAME	MIDDLE NAME
CURRENT MAILING ADDRESS:		PERMANENT MAILING ADDRESS (if different):
NUMBER AND STREET	APT. NO.	NUMBER AND STREET
CITY, STATE, ZIP/POSTAL CODE, COUNTRY (if not U.S.)		CITY, STATE, ZIP/POSTAL CODE, COUNTRY (if not U.S.)
TELEPHONE	E-MAIL ADDRESS (write legibly)	TELEPHONE

DATE OF BIRTH (month/day/year) PLACE OF BIRTH (city, state/country) CITIZENSHIP

If you are a U.S. citizen or permanent resident, please indicate your ethnic origin. (Although self-identification is entirely voluntary, the U.S. Dept. of Education requires Stanford to report on the composition of its student enrollment.)

- American Indian/Alaska Native (tribal affiliation: _____)
 African American/Black Asian American/Pacific Islander
 Caucasian Ethnic Hawaiian
 Mexican American (Chicano) Other Hispanic
 Puerto Rican Other
 Decline to state

If you are a non-U.S. citizen currently living in the United States, what is your immigration status?

- Student (F1) Student Spouse (F2)
 Exchange Visitor (J1) Exchange Visitor Spouse (J2)
 Permanent Resident (give number) _____
 Other (specify type) _____

SELECT YOUR CATEGORY: FICTION POETRY

*****IMPORTANT: You may only apply in one category. Applicants who submit in both genres will be not be considered for the fellowship in either genre.*****

EDUCATION INFORMATION:

TITLES OF WORK SUBMITTED:

OPTIONAL – PUBLISHED WORK (LIST TITLE AND WHERE):

STATEMENT OF PLANS: On a separate sheet, please briefly explain your writing plans and what the fellowship would contribute to them. Statement may not exceed 1000 words.

MANUSCRIPTS ACCOMPANYING APPLICATIONS:

FICTION: Please check and submit **one** of the following, **typed and double-spaced:**

- Two (or more if very short) short stories
 One short story and a novel excerpt
 A novel excerpt

POETRY: Please submit a small group of poems (approximately 10-15 pages), **typed** (no specific formatting is required)

Your submission should be approximately 9,000 words, regardless of your choice.

Please keep copies; **statements of plans and manuscripts cannot be commented upon or returned, and cannot be amended or added to once we have received them.** If you wish, you may include your name on your manuscript or on a cover page.

RECOMMENDERS: Please list two people who know you personally and can speak to your suitability for our workshop. **They SHOULD NOT send letters of recommendation;** we will contact them only if necessary.

1. _____
NAME

2. _____
NAME

NUMBER AND STREET APT. NO.

NUMBER AND STREET APT. NO.

CITY, STATE, ZIP/POSTAL CODE, COUNTRY (if not U.S.)

CITY, STATE, ZIP/POSTAL CODE, COUNTRY (if not U.S.)

TELEPHONE

TELEPHONE

E-MAIL ADDRESS

E-MAIL ADDRESS

RELATIONSHIP

RELATIONSHIP

The information I have supplied on this application is true to the best of my knowledge.

SIGNATURE

DATE

RETURN ENVELOPE: Decision notification will be sent to the email address entered on the application. If you would like a decision letter mailed to you, include a **self-addressed, stamped, business-size (4" x 9½") envelope**. The return address on this envelope should be the same address to which your application is sent (see below). If you are currently living outside the United States, you do not need to include postage; we will provide it for you.

CHECKLIST FOR APPLICATION:

- MANUSCRIPT TO BE CONSIDERED
- STATEMENT OF PLANS
- PROCESSING FEE OF \$75, PAYABLE TO STANFORD UNIVERSITY
- SELF-ADDRESSED, STAMPED, BUSINESS-SIZE ENVELOPE
(Include only if you would like a decision mailed to you rather than emailed)
- THIS COMPLETED, SIGNED APPLICATION FORM
(2 PAGES, OR 1 DOUBLE-SIDED PAGE)

Applications will be accepted with a **postmark of September 1 through December 1**. We do not accept applications before or after those postmarked dates, no exceptions. The order in which applications are received has no bearing on the selection process; early applications are not necessarily read first.

Mail your completed application to:

**Admissions Coordinator
Creative Writing Program
Stanford University
450 Serra Mall, Building 460
Stanford, CA 94305-2087**

If you have any questions, or if the contact information for either you or your recommenders changes after your application has been submitted, contact the Admissions Coordinator at stegnerfellowship@stanford.edu, or the address above. You may also wish to visit our website, <http://www.creativewriting.stanford.edu>. Applicants will be notified of the selection committee's decision in April.