## Mellon Mays Undergraduate Fellowship Alumni Update Form

Personal Informa Name:	tion			
Preferred address:				
	(city)	(sta	ite) (zip)	
Preferred phone:	<del></del>	·	· · · · · · · · · · · · · · · · · · ·	
Preferred E-Mail:				
Employment Info Current position:	<del></del>			
Institution or company Location:	y:			
<b>Bowdoin Educati</b>	on			
Major:	Degree:		Year:	_
MMUF research topic	··			
MMUF Research Adv	visor:			
Other Academic	or Professional I	nstitutions		
Institution	Department	Dates of Attendance	Degree Obtained	Date of Graduation
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Additional Comments and Suggestions	
I grant permission for the publication of my name and news on the Mellon Mays Undergraduate F website ( <a href="https://doi.org/10.2016/journal.org/">bowdoin.edu/special-academic-programs/</a> ). Yes: No:	ellowship
Please note that your updated contact information will be shared with Bowdoin's Development off	ice.
Thank you for taking the time to fill out this form, and please feel free to contact me at or by phone at 207-725-3461	by mail