Initiative in Holocaust, Genocide, and Memory Studies

Application for the Graduate Student Certificate

(N.B.: This application should typically be submitted after you have completed at least one dissertation chapter or a full draft of your master's thesis.)

| Name: | | Advisor: | | |
|--|---|--|-------------------------|---------------------|
| E-mail: Department: | | Affiliated Committee Member(s), if applicable: | | |
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| Campus Addres | s: | | | |
| Dissertation or I | Master's Thesis title: | | | |
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| In two or three s | sentences, please describe how | your dissertation | or thesis re | elates to the field |
| | enocide, and Memory Studies: | | | |
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| List the Initiative | e-affiliated courses you have ta | ıken (minimum tw | vo): | |
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| Dept. & Course # List the Initiative attended or post | Title e-affiliated events (such as lect so you have contributed to the | Instructor ures, workshops, | or conference and Memor | nces) you have |
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The Initiative in Holocaust, Genocide, and Memory Studies 109 English, University of Illinois at Urbana-Champaign 608 South Wright Street, Urbana, Illinois 61801 Contact Director Brett Kaplan with any questions: bakaplan@illinois.edu