

**Visiting Scholar
Application Form**

# IN WHICH QUARTER WOULD YOU LIKE TO BEGIN YOUR RESEARCH?

## FALL WINTER SPRING SUMMER

YEAR 20\_ \_

**PROPOSED DURATION**  **# OF MONTHS**

ARRIVAL DATE (MM/DD/YY) DEPARTURE DATE (MM/DD/YY)

**PERSONAL INFORMATION**

*Please use the same name shown in your passport*

1. FIRST NAME

 *(given name)*

1. MIDDLE NAME

*(leave blank if no middle name)*

1. LAST NAME

 *(family name)*

4.U.S. SOCIAL SECURITY NUMBER *(if applicable)*

5.DATE OF BIRTH (MM/DD/YYYY) 6. MALE FEMALE

1. COUNTRY OF CITIZENSHIP
2. COUNTRY OF BIRTH
3. HOME ADDRESS

U.S. CITIZEN PERMANENT U.S. RESIDENT

*(visa papers will be mailed here)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CITY |  |  STATE |  |  ZIP CODE |
| COUNTRY |  |  |  |  |  |
| 10. HOME PHONE |  |  E-MAIL |  |  |  |
| 11a. MOTHER TONGUE |  |  11b. ENGLISH LEVEL |  |  |  |

**CURRENT INSTITUTIONAL AFFILIATION / EMPLOYER INFORMATION**

1. INSTITUTION
2. DEPARTMENT TITLE

1. ADDRESS

CITY STATE ZIP CODE COUNTRY

1. TELEPHONE FAX

## 16. WEBSITE

**RESEARCH INFORMATION**

1. COUNTRIES OF INTEREST
2. AREA(S) OF INTEREST

19a. RESEARCH TOPIC TITLE

 *\* ATTACH A ONE (1) PAGE SUMMARY OF YOUR PROPOSED RESEARCH*

19b. PROPOSED FACULTY ADVISOR or GW CONTACTS

*\* PLEASE CONTACT* [*FACULTY*](https://elliott.gwu.edu/faculty) *IN ADVANCE ABOUT ADVISING AS HIS/HER NAME WILL BE ON YOUR VISA PAPERWORK*

PROPOSED FACULTY ADVISOR NAME: EMAIL:

 GW CONTACTS

**EDUCATIONAL INFORMATION**

20.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ATTENDANCE (M/YY)** | **NAME OF SCHOOL** | **CITY, COUNTRY** | **MAJOR SUBJECT** | **DEGREE** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**SOURCE OF FUNDING**

21.

 GOVERNMENT UNIVERSITY PERSONAL OTHER

\* PLEASE SPECIFY HOW YOU PLAN TO FUND YOUR VISIT

DOES YOUR SCHOLARSHIP REQUIRE ANY SPECIFIC FUNDING FROM THE HOSTING INSTITUTION (SIGUR CENTER)?

NO YES

 IF YES, PLEASE SPECIFY

**CONTACT INFORMATION**

22. NAME AND PERMANENT ADDRESS OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME

ADDRESS

TELEPHONE

E-MAIL

**VISITING SCHOLAR EXPECTATIONS**

23. Visiting Scholars at the Sigur Center are expected to play an active role in the intellectual life of the Sigur Center and the Elliott School of International Affairs. As such, Visiting Scholars at the Sigur Center should anticipate participating in activities, such as but not limited to attending Sigur Center events and providing guest lectures in GW courses related to their research topic. Visiting Scholars must also present their research in an **oral presentation** or **written report** to the Sigur Center by the end of their term as a visa requirement. Specific arrangements for participation in activities and submission of research findings, such as logistical details of the presentation and/or length and content of written report, will be communicated and confirmed between the Visiting Scholar, Sigur Center staff, and the Scholar’s GW faculty advisor as needed.

Additionally, due to the high volume of Visiting Scholar applications and limited office space available at Sigur Center, accepted Scholars may have to share desk space during their research term. This will also be communicated and confirmed between the Visiting Scholar and Sigur Center staff as needed.

**By signing below, you acknowledge and accept the above expectations.**

**Sign**

**APPLICATION INSTRUCTIONS**

## ONLY *COMPLETE* APPLICATIONS WILL BE CONSIDERED, PLEASE REFER TO THIS CHECKLIST:

## This **form saved as** **FirstName\_LastName\_F19.pdf**

## **One (1) page summary** of your proposed research in .doc or .pdf format

## **CV**

## **Two (2) recommendation letters**, sent directly to Helen Jiang, Program Coordinator, at hjiang310@gwu.edu, or attached with your application package in .doc, .pdf, or by mail

## Apply by Mail: Sigur Center for Asian Studies

Visiting Scholar Program

Elliott School of International Affairs, George Washington University 1957 E Street, N.W., Suite 503

Washington D.C., 20052 U.S.A.

Apply by Fax: (202) 994-6096 Apply by E-mail: hjiang310@gwu.edu More information: +1 (202) 994-9735

**Sign**

**Date** (MM/DD/YY)/ /