



THE GRADUATE SCHOOL

www.salemstate.edu/graduate

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Application for Visiting International Scholars Salem State College, Massachusetts, 01970, USA

Please note that applications for Visiting International Scholars must be received at least 90 days prior to the expected date of arrival at Salem State College.

Salem State College welcomes applications from Visiting International Scholars and believes that they enhance the diverse, multicultural, scholarly environment on our campus. We are able to accept a select number of scholars each year. We urge applicants to complete the application below as fully as possible (use extra pages if necessary) and provide as much detail as possible about themselves and their expectations for their time at the College. The more information we have, the more able we will be to make the scholar's time at the College productive for him or her as well as for the Salem State College community.

Personal Information (Please type or print all responses clearly.)

Family/Last name: _____

Given/First name: _____

Middle name(s): _____

Date of Birth (DD/MM/YYYY): _____

Gender (select one): _____ Male _____ Female

Home address: _____

Important: The names you list above must correspond to those on your passport. If you prefer to use another name in daily life, please list that below, placing those names in the order in which they should be used in conversation.

City and country of birth: _____

Country of citizenship: _____

Country of legal permanent residence: _____

E-mail address: _____

Work phone number (include country code): _____

Home phone number (include country code): _____

Mobile phone number (include country code): _____

Fax number (include country code): _____

If you are invited to the department as a Visiting Scholar, do you intend to bring other family members? (select one):

_____ Yes _____ No

If yes, what are their relationships (for example, husband, wife, son) to you? Please provide their names below and relationship. Additionally, for children provide the ages at the time of your planned visit. (Note: This information is not relevant for selection but must be used in planning if your application is accepted)

Academic Background (please attach curriculum vitae or resume)

Earned highest degree: _____ Date: _____

Institution and Location: _____

Major Field of Study: _____

Who at Salem State College has invited you to be a Visiting International Scholar?

Name: _____ Department: _____

Current Institutional/Organizational Affiliation

Name of Institution/Organization: _____

Address of Institution/Organization: _____

Current Position in Institution/Organization: _____

Proposed Length of Stay as Visiting International Scholar

What dates do you intend to be at Salem State College as a Visiting International Scholar?

Start Date (day/month/year) _____ through End Date _____

Academic Nature of Proposed Visit

1. Please describe your reasons for selecting Salem State College and what you plan to accomplish during the period you intend to visit Salem State College. (Please respond on a separate sheet.)

2. Proposed Activity to Meet the Goals Stated Above (check all that apply):

- _____ Conduct research on own project (topic of project _____)
- _____ Conduct research with department faculty member in area of _____
- _____ Utilize library resources
- _____ Attend courses with instructor approval
- _____ Other (please specify _____)

Will you agree to present to the appropriate Salem State College faculty and students the results of your activities as a Visiting International Scholar? (select one) _____ Yes _____ No

Additional Information (for use if accepted)

Indicate Contact Information for a Person in Home City/Country in Case of Emergency:

Name: _____

Home address: _____

E-mail address: _____

Work phone number (include country code): _____

Home phone number (include country code): _____

Mobile phone number (include country code): _____

Are you presently in the United States? (select one) _____ Yes _____ No

If yes, please indicate your immigration status.

If you have visited the United States previously under a type J visa, please indicate the beginning and end dates of your most recent visit, as well as the purpose of the visit. If you have not previously visited the United States under a J visa, please write "Not Applicable".

From _____ To _____

Purpose of visit at that time: _____

Financial declaration

Please submit an original bank statement or credit reference stating the availability of sufficient funds to cover estimated expenses. Please note that housing, board and personal expenses are the sole responsibility of the applicant and not Salem State College. If your home institution is providing you with additional financial support, please list the amount(s) below.

Scholarship from _____ in the amount of \$ _____;

Support from the University of _____ in the amount of \$ _____;

Other support from _____ in the amount of \$ _____.

Medical insurance: Every visiting scholar and accompanying family members must carry health insurance—including medical evacuation and repatriation. Please explain how medical insurance is being provided:

Name of Insurance Company: _____ Policy #: _____

Please attach a copy in English of your curriculum vitae or resume.

I have read, understand, and agree to the Visiting International Scholar guidelines provided by Salem State College. I understand that if accepted, as indicated in a letter of invitation I will receive, that I will assume responsibility for completing the necessary visa paperwork, etc. through the Salem State College Center for International Education.

Signature _____ Date _____

Submit the completed application to

Dr. Donald Ross

Director

Center for International Education

Salem State College

Salem, MA 01970

Phone: 978 542-7107

FAX: 978 542-7104

Email: dross@salemstate.edu

Please be sure to retain a copy of the application for yourself.

(Revised August 20, 2007)