

# Institute for Korean Studies Visiting Scholar Application Form

## PROPOSED DATE

IN WHICH QUARTER WOULD YOU LIKE TO BEGIN YOUR RESEARCH?			
<input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer	YEAR:	PROPOSED DURATION	(months)
ARRIVAL DATE		DEPARTURE DATE	

## PERSONAL INFORMATION

FIRST NAME		MIDDLE NAME	
LAST NAME		DATE OF BIRTH (MM/DD/YYYY)	
GENDER	<input type="checkbox"/> Male <input type="checkbox"/> Female	U.S. SOCIAL SECURITY NUMBER (IF APPLICABLE)	( _____ - _____ - _____ )
COUNTRY OF CITIZENSHIP		COUNTRY OF BIRTH	
IF YOU ARE RESIDING IN THE U.S., WHICH ONE OF THE FOLLOWING STATUS ARE YOU IN?		<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent U.S. Resident <input type="checkbox"/> Visa	
HOME ADDRESS (Street, City, State, Zip Code, Country)			
PHONE NUMBER		E-MAIL	
MOTHER TONGUE		ENGLISH LEVEL	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Professional <input type="checkbox"/> Native

**CURRENT INSTITUTIONAL AFFILIATION/EMPLOYER INFORMATION**

<b>INSTITUTION</b>			
<b>DEPARTMENT</b>		<b>TITLE</b>	
<b>INSTITUTION ADDRESS (Street, City, State, Zip Code, Country)</b>			
<b>TELEPHONE</b>		<b>E-MAIL</b>	
<b>WEBSITE</b>			

**RESEARCH INFORMATION**

<b>COUNTRIES OF INTEREST</b>	
<b>AREA(S) OF INTEREST</b>	
<b>RESEARCH TOPIC TITLE</b>	

**\*PLEASE ATTACH A ONE PAGE SUMMARY OF YOUR PROPOSED RESEARCH**

**EDUCATIONAL INFORMATION**

<b>DATES OF ATTENDANCE</b>	<b>NAME OF SCHOOL</b>	<b>LOCATION</b>	<b>MAJOR SUBJECT</b>	<b>DEGREE</b>

## SOURCE OF FUNDING

<input type="checkbox"/> Government	<input type="checkbox"/> University	<input type="checkbox"/> Personal	<input type="checkbox"/> Other:
PLEASE SPECIFY HOW YOU PLAN TO FUND YOUR VISIT			
DOES YOUR SCHOLARSHIP REQUIRE ANY SPECIFIC FUNDING FROM THE HOSTING INSTITUTION (GWIKS)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
IF YES, PLEASE SPECIFY			

## EMERGENCY CONTACT INFORMATION

NAME AND PERMANENT ADDRESS OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
FULL NAME		RELATIONS TO YOU	
ADDRESS			
PHONE		E-MAIL	
FACULTY CONTACTS AT GW			

**PLEASE SEND YOUR ONE-PAGE RESEARCH SUMMARY, DESCRIPTION OF RESOURCES, AND CV ALONG WITH THIS APPLICATION FORM.**

Apply by Mail: Institute for Korean Studies  
Visiting Scholars Program  
Elliott School of International Affairs  
The George Washington University  
1957 E Street, N.W., Suite 503  
Washington D.C., 20052  
U.S.A.

Apply by Fax: (202) 994- 6096 (Make sure to call us before faxing in.)

Apply by E-mail: [gwiks@gwu.edu](mailto:gwiks@gwu.edu)

For more information and questions about the application process, call (202) 994-3259 or e-mail [gwiks@gwu.edu](mailto:gwiks@gwu.edu).

APPLICANT'S SIGNATURE	
TODAY'S DATE (MM/DD/YYYY)	