**Application Form 2017**

**Before completing this form, please ensure that you meet the criteria for the scholarships as detailed in our** **Terms of Reference.**

**Personal details**

|  |  |
| --- | --- |
| Title (Mr/Ms) |  |
| Family Name |  |
| First Name |  |
| Date of Birth |  |
| Address |  |
| Telephone |  |
| Email |  |
| Nationality |  |

**Family information**

|  |  |  |  |
| --- | --- | --- | --- |
| Father’s Name |  | Occupation |  |
| Mother’s Name |  | Occupation |  |

**Siblings**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Date of Birth |  |
| Name |  | Date of Birth |  |
| Name |  | Date of Birth |  |
|  |  |  |  |

**Requested period of scholarship**

|  |  |  |  |
| --- | --- | --- | --- |
| From |  | Until |  |

**University in the US**

|  |
| --- |
|  |

**Financial information**

Please indicate the amount of other funds available to you for financing your stay in the U.S. (in total, for all months you plan to spend abroad).

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Personal Savings |  | Amount in total |  |
| 2. Family Funds |  | Amount in total |  |
| 3. Sponsor’s Funds |  | Amount in total |  |
| 4. Other (please specify) |  | Amount in total |  |

**Past and current scholarships**

Have you already received (or are you currently receiving) a scholarship?

|  |  |
| --- | --- |
| Yes | Please indicate which one/s |
| No |  |

**Stays abroad**

Did you stay in the U.S. before?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No | Yes | From  From  From |  | Until  Until  Until |  |

Did you stay abroad before?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| No | Yes | Where  Where  Where |  | From  From  From |  | Until  Until  Until |  |

**Language skills**

Please indicate your degree of fluency in English, using **Excellent**, **Good**, **Fair**, or **Poor**.

**English**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Reading |  | Speaking |  | Writing |  |

**Other languages**

Please indicate which one

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Reading |  | Speaking |  | Writing |  |

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Reading |  | Speaking |  | Writing |  |

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Reading |  | Speaking |  | Writing |  |

**Reference from a university professor**

|  |  |
| --- | --- |
| Name |  |
| Institution |  |

Please ask your referee to send his/her recommendation (in English or German) directly via email or postal service to

Dr. Anna Hofmann

Program Director Research and Scholarship

ZEIT-Stiftung Ebelin und Gerd Bucerius

Feldbrunnenstraße 56

20148 Hamburg

Germany

[hofmann@zeit-stiftung.de](mailto:hofmann@zeit-stiftung.de)

The letter is due to be received by **31 March 2017.**

**Check-list**

In addition to the application form and the letter of recommendation please include the following documents to your scholarship application:

* Curriculum Vitae
* Copy of High School Diploma (Abiturzeugnis)
* Transcript of Records (Leistungsübersicht aus dem BA-Studium)
* Essay explaining your motivations and why you should be considered for a scholarship (max 2 pages)

**Contact**

If you have any queries or you require assistance in completing this form, please contact Ms Marcella Christiani at [christiani@zeit-stiftung.de](mailto:christiani@zeit-stiftung.de) or phone 0049 /(0) 40 41 33 67 75.

Completed applications should be returned to the address below via email or postal service:

Dr. Anna Hofmann

Program Director Research and Scholarship

ZEIT-Stiftung Ebelin und Gerd Bucerius

Feldbrunnenstraße 56

20148 Hamburg

Germany

[hofmann@zeit-stiftung.de](mailto:hofmann@zeit-stiftung.de)

All documents are due to be received **by 31 March 2017**.