



The Paul & Daisy Soros Fellowships For New Americans

APPLICATION FORM

Application deadline is a postmark of **NOVEMBER 1, 2010.**

Please type or print neatly.

NAME	
First Name(s):	Last Name:
Current Mailing Address:	
City/State/Zip Code:	
Phone Number:	Email:
Social Security Number:	Gender: F _____
	M _____

Date of Birth: _____	Place of Birth: _____
Date of arrival to the US (if different): _____	
Date of arrival of parents to the US: _____	
Mother's Name: _____	Place of Birth: _____
Father's Name: _____	Place of Birth: _____
Places of Family Origins:	
First Language:	Other Languages:

Are you?	<input type="checkbox"/> Green Card Holder	Alien Registration Number	A# _____
	<input type="checkbox"/> Naturalized Citizen	Citizenship Number	_____
		Date of Naturalization	_____
	<input type="checkbox"/> Son/Daughter of Naturalized Parents	Father's Citizenship Number	_____
		Date of Naturalization	_____
		Mother's Citizenship Number	_____
		Date of Naturalization	_____

Note: Please submit copies of pertinent identification.

Permanent Address (if different from current mailing address):	
City/State/Zip Code:	
Phone Number: _____	Email: _____

Parents' Names:	
Parents' Address:	
Parents' Phone: _____	Email: _____

EDUCATION LEVEL: Please indicate below whether you are currently in an undergraduate or graduate program. If you are not currently enrolled in a program, please mark *Not Enrolled*. (*)**Transitional graduate programs** are those where you are currently enrolled but do not intend to pursue under this Fellowship.

Undergraduate _____ **Graduate** _____
Transitional Graduate Program* _____ **Not Enrolled** _____

HISTORY OF HIGHER EDUCATION

UNDERGRADUATE EDUCATION: List all institutions of higher education that you have attended at the UNDERGRADUATE level; please indicate below the degree awarded or expected (e.g. BA).

Institution	Degree	Major	GPA	Dates Attended (e.g. 9/05 – 6/10)

GRADUATE EDUCATION:
CURRENT GRADUATE INSTITUTION. Please indicate below the degree expected (e.g. MS, JD, PhD). If you are in a dual degree program please list each graduate program on a separate line indicating clearly your current status in each program.

Institution	Program	Degree	GPA	Status in Program (e.g. 1st year JD)

PREVIOUS GRADUATE INSTITUTION. List all previous institutions that you have attended at the GRADUATE level with the most recent first. Please indicate below the degree awarded (e.g. MA, MPH).

Institution	Program	Degree	GPA	Dates Attended (e.g. 9/05 – 6/10)

Please submit copies of transcripts for all programs attended (undergraduate and graduate). Photocopies may be submitted.

PLEASE LIST GRADUATE SCHOOLS TO WHICH YOU ARE APPLYING AND WISH TO ATTEND UNDER THIS FELLOWSHIP. If currently enrolled in a graduate program and are seeking a Soros Fellowship to pursue this program, please indicate and include in this section. You may attach another sheet.

Institution	Department/Program	Degree Sought

Note: Awarding of a Soros Fellowship depends on admission into a graduate program. This is the responsibility of the candidate.

TEST SCORES

Have you taken the required graduate aptitude test (e.g. GMAT, GRE) that is required for your current or proposed graduate program?

Yes No Test Taken Not Required

Date Taken: _____ Score: _____

If not taken, when scheduled?

Note: Score must be available by the second week of December 2010. You may provide a photocopy of the score report.

SELECTION CRITERIA

Please indicate below and in Application Essay 1 how you fulfill these criteria by your life experience and activities:

i. *Creativity, originality and initiative, demonstrated in any area of your life*

ii. *Capacity for accomplishment, demonstrated through activity that requires drive and sustained effort*

iii. *Commitment to the values expressed in the US Constitution and the Bill of Rights*

Candidates must submit a one- to two-page resume. In addition, up to five pages of exhibits may be submitted to corroborate their achievements regarding the above criteria. Exhibits will be given strong consideration.

RECOMMENDATIONS

Applicants must ensure that recommendations are sent directly to the Program by

NOVEMBER 1, 2010**FIRST RECOMMENDATION**

First Name (s):

Last Name:

Title :

Institution:

Address:

City/State/Zip Code:

Phone Number:

Relationship to Applicant:

Email:

SECOND RECOMMENDATION

First Name (s):

Last Name:

Title:

Institution:

Address:

City/State/Zip Code:

Phone Number:

Relationship to Applicant:

Email:

THIRD RECOMMENDATION

First Name (s):

Last Name:

Title:

Institution:

Address:

City/State/Zip Code:

Phone Number:

Relationship to Applicant:

Email:

Where did you hear about The Paul & Daisy Soros Fellowships for New Americans?

University Authorities _____

Soros Fellows _____

Other Students _____

Internet _____

Paul & Daisy Soros Website _____

News Media _____

Soros Poster _____

Student Organization List Serves _____

Professional Affiliation List Serves _____

Ethnic & National List Serves _____

Other (please indicate) _____

SIGNATURE: _____ Date: _____