

## 2019 STUDY OF THE UNITED STATES INSTITUTES (SUSI) FOR SCHOLARS APPLICATION FORM



Α.	Title	e of the Institute: <u>Study of the</u>	United States Institute on U.S. National Security Policymaking			
В.	3. Applicant's full name, exactly as it appears on applicant's passport:					
		Prefix:				
		Last name:				
		First name:				
		Middle name:				
C.	Gen	der				
-		Male □				
		Female $\square$				
D.	Date	e of birth (mm/dd/yyyy):				
_	Rirtl	h City:				
L.	וטוונו	ii City.				
F.	Birth	h Country:				
G.	Citiz	zenship				
		Primary:				
		Secondary (if applicable):				
н.	Cur	rent country of residence:				
I.	Med	ical, Physical, Dietary or other	Personal Consideration:			
			ical conditions, including any prescription medication the			
caı	ndida	ate may be taking, allergies, or	other dietary or personal consideration. This will not affect			
caı	ndida	ate selection, but will enable th	e host institution to make any necessary accommodations. )			
Dis	abili	tv:				
		Blind & Visual Impairments				
	2.	Deaf and Hearing Impairments	s 🗆			
	3.	Learning Disabilities				
	4.	New Disability Descriptions				
	5.	Physical Disabilities				
	6.	Psychiatric Disabilities				
	7.	Systemic Disabilities				

Comment:							
J. Applicant's con	tact information:						
Address:							
City:							
Province:							
Postal Cod	e:						
Country:							
Email:							
Phone:							
Emergency	/ Contact Name & Re	lationship (Example: John Doe, Hu	usband):				
	Contact Phone:	(	,				
	Contact Email:						
	,						
K. Current Positio	ns, Title, Institution:						
Title:							
Institution	Institution Name:						
Position ty	pe (check what appli	es to you):					
	☐ Senior University Official (President), Government Minister, Senior Executive, etc.						
	University Dean, G	overnment Advisor, Vice President	t, Junior Executive				
	Senior Professor, D	epartment Chair, Director, Editor,	Officer, etc.				
	Associate Professo	r, Senior Researcher/Think-Tank Fe	ellow, Senior Staff, etc.				
	Assistant Professor	r, Coordinator, mid-level Staff Rese	earcher/Think-Tank Fellow, etc.				
	Lecturer, Teacher,	Consultant					
	Teaching Assistant	, Instructor					
	Other						
		us positions and titles (Use addition					
From (date)	To (date)	Title/Institution (Please specify	Responsibilities (including				
		if position is part-time)	courses taught, number of				
			students, etc.)				

М.	<b>Education, Academic and Professi</b>	onal Training including degrees earned and fields of
spe	ecialization:	

Degree Earned	Year Earned	Specialization	Institution/City

N. Additional Professional Training:				

## O. Active Professional Membership:

Active Professional Memberships independent of current professional responsibilities; these should not include university committee work or other professional duties directly related to current employment.

Position Type	Title	Organization

## P. Publications Related to the Institute Theme (up to 10):

Publication Type (indicate what applies): Book, Edited Volume (Primary/ Co-Editor), Book Chapter, Journal Article, Newspaper/online Article, Conference/University/ Government Publication	Year	Publication Title	Publisher
			_

Q. Previous Experience in the United States:					
Purpose	From (date)	To (date)	Description/Sponso	r	
R. Family/Friends Ro Please provide name	_		n the United States, i	f any.	
S. English Proficience (TOEFL test score or self-evaluation)	Writing:		d□ Fair□ d□ Fair□ d□ Fair□		
T. Professional Resp Please discuss your p administrative respon	rofessional responsi				
Current Courses Taught:					
Course Title	Level of Students	Classroom Hour	Number of	U.S. Studies	
		per Semester	Students	Content (%)	

## **Current Student Advising:**

Advising is not the same as teaching. We are looking for the number of students, their level, and the hours the candidate spends providing assistance in helping students clarifying personal and career goals, and evaluating the progress towards those goals. This section can also include those that supervise PhD and graduate students.

studying U.S. related topics	Masters, or Undergraduate)	per year				
Other Potential Outcomes: Please select any likely potential professional outcomes of this program.						
☐ Update existing course	☐ Create new course	☐ Create new degree program				
☐ University curriculum design	☐ National curriculum design	☐ New research project				
☐ New publication	☐ Professional promotion	☐ Government or Ministry Policy				
☐ New professional Organization	☐ New institutional linkages	☐ Raise institutional profile				
T. Personal Essay (Limit 250 words)  Please discuss how your participation would enhance your personal and professional goals, the current state of U.S. studies at your institution, or the role that you have been playing in developing U.S. studies in Ukraine. Include how attending this institute would help you achieve the "Other Potential Outcomes" you have checked above and amplify the impact of the program beyond your research and knowledge.						

Level of students (Ph.D.,

Number of students advised

Hours of advising per student

Please send the completed application form to the following email address: <a href="mailto:belarusprogram@state.gov">belarusprogram@state.gov</a>

Deadline for applications: Monday, October 1, 2018