**INTERNATIONAL VISITING DOCTORAL STUDENTS PROGRAM APPLICATION FORM**

Instructions

* Please complete all sections and enter “not applicable” or “N/A” as needed.
* After completing the application form, save it using the following naming convention: LASTNAME\_IVDS\_Application
* Submit your saved application form along with other documents to Professor Pengju Zhang, Director of International Programs by emailing spaa.international@newark.rutgers.edu.
* Any questions about this application form or the International Visiting Doctoral Students program should be directed to spaa.international@newark.rutgers.edu.

**BASIC INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Last Name | Middle Name |  First Name |  Gender |
|  |  |  |
| Primary citizenship |  Country of Permanent Residence | Date of birth (MM/DD/YYYY) |
|  |  |
| Name of Home Institution  |  Country  |
|  |  |
| Department or school name |   |
|  |  |
| Your starting date in the PhD program (MM/YY) | Expected graduate date (MM/YY) |
|  |  |
| Your major and specializations |
|  |  |
| Name of your dissertation advisor (Last name, First name) |
|  |  |
| Proposed arrival date (MM/DD/YYYY) | Proposed departure date (MM/DD/YYYY) |

Please be sure to enclose a support letter from your dissertation advisor with the application.

**CURRENT U.S. VISA STATUS (IF APPLICABLE)**

Please complete only if you are currently in the U.S. and not a U.S. citizen. Otherwise, please continue to the next section.

Are you currently in the United States? Yes\_\_\_ No\_\_\_

What was the date of your last arrival in the U.S.? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (MM/DD/YYYY)

What kind of U.S. immigration status do you currently hold? (example: J1, B2) \_\_\_\_\_\_\_\_\_\_\_

What period does your current DS-2019 cover?

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Start (MM/DD/YYYY) |  End (MM/DD/YYYY) |  |

What is your current U.S. address?

|  |
| --- |
|  |
| Street Number |
|  |  |  |
| City | State or Province | Country and Postal Code |

**CONTACT INFORMATION**

Your primary Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your postal address:

|  |
| --- |
|  |
| Street Number |
|  |  |  |
| City | State or Province | Country and Postal Code |

**RESEARCH PLAN**

Title of your proposed dissertation research:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your proposed research advisor from Rutgers faculty (your sponsor):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Last name, First name)

Please note that your prospective sponsor has to be from Rutgers SPAA core faculty. You should contact your prospective sponsor directly to ask for agreement.

Please be sure to submit a copy of your research proposal (2-3 pages, double spaced) with this application form.

**LANGUAGE PROFICIENCY**

Please list your native language(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

If you are a native English speaker, please continue to the next section.

If you have taken any standardized English proficiency test (such as TOEFL, IELTS), please provide the following information.

Name of the test:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of the test (MM/DD/YYYY):\_\_\_\_\_\_\_\_\_\_\_\_ Your score:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please attach a copy of your test with the application form. If you do not have any standardized English proficiency test, Rutgers SPAA will arrange a Skype or phone interview with you before considering your application.

**FINANCIAL INFORMATION**

Once accepted into SPAA International Visiting Doctoral Students program, Rutgers Office of International Student and Scholar Services (OISS) will require that you provide documentation of your ability to support yourself financially while in the United States.

Please list your expected sources of financial support in residence at Rutgers SPAA.

Source 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source 3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_