

# EXCHANGE SCHOLAR PROGRAM APPLICATION

## PURPOSE

The Exchange Scholar Program enables a graduate student enrolled in a doctoral program in one of the participating institutions to study at one of the other graduate schools for a limited period of time so as to take advantage of particular educational opportunities not available on the home campus. In the case of a student accompanying a dissertation advisor who has joined the host school, more than a year's enrollment as an Exchange Scholar is permitted. The academic experience, including courses taken and/or research conducted with particular faculty at the visited institution will be registered on the academic record maintained by the student's home institution.

The graduate schools of the institutions listed on the program description are participants in the Exchange Scholar Program. If you are currently in a Ph.D. program at one of these institutions (your "home institution") and wish to study for a term or academic year at another (the "visited" or "host" institution), you should read the program description and complete the application as indicated. **All approvals must be obtained two months before the registration date at the host institution.**

Please be aware that the host institution may charge an application fee or fees for services that are not covered by tuition such as health and hospitalization charges. It is your responsibility to meet these charges.

## Modifications

The Exchange Scholar Program was renewed in July 2013 for a five-year period. However, the participating institutions may modify the program at any time and individual institutions may withdraw from the program at any time.

**A.** Complete all parts (questions 1-8). *Please print or type all information.*

1. Name \_\_\_\_\_  
Last First Middle

Student ID number at Home Institution \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Email \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ Visa Status \_\_\_\_\_

Home Institution will continue to issue certificate of eligibility (I-20 or IAP-66)

Will student be paid by the host institution? (Yes/No) \_\_\_\_\_

If yes, the student must visit the visa office at the host school.

2. In your present program:

Ph.D. Degree sought \_\_\_\_\_  
(e.g., History, Biology)

Term of initial registration \_\_\_\_\_  
(e.g., Fall 2015)

Expected completion date of degree \_\_\_\_\_  
(e.g., May 2018)

3. Quarter(s)/Term(s)/Semester(s) you propose to spend at the institution to be visited (e.g., Fall 2017, Spring 2018). Please check with the host school first if you are proposing to visit during the summer.

\_\_\_\_\_

Have you ever been an Exchange Scholar before? If yes, when? \_\_\_\_\_

Are you applying for an extension of your Exchange Scholar status? (Yes/No) \_\_\_\_\_

**Home Institution**

**Host Institution**

4. Name of Institution \_\_\_\_\_

5. Department or program \_\_\_\_\_  
(Use official title from graduate school catalog)

6. Subfield, subject or area of concentration \_\_\_\_\_

7. Address to which bills or other information should be sent:

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Fax number \_\_\_\_\_

8. Please describe your proposed plan of study during the exchange and indicate why it is essential to your degree program. (attach another page if necessary)

**B.** Provide the following information on the courses you wish to take (including dissertation research, if appropriate) at the institution to be visited. Enter information exactly as it appears in that institution's catalogue.

| <u>Term</u> | <u>Course number</u> | <u>Full course title</u> | <u>Credit</u> | <u>Instructor</u> | <u>Instructor's signature</u> |
|-------------|----------------------|--------------------------|---------------|-------------------|-------------------------------|
| _____       | _____                | _____                    | _____         | _____             | _____                         |
| _____       | _____                | _____                    | _____         | _____             | _____                         |
| _____       | _____                | _____                    | _____         | _____             | _____                         |
| _____       | _____                | _____                    | _____         | _____             | _____                         |

**C.** Funds for support for the requested period of study are available as follows:

| <u>Source</u>               | <u>Type</u>  | <u>Tuition</u> | <u>Living Stipend</u> |
|-----------------------------|--|----------------|-----------------------|
| (e.g., Home Inst, External) | (e.g. Fellowship,<br>Research assistantship,<br>Loans, etc.) | (\$ amount)    | (\$ amount)           |
| _____                       | _____  | _____          | _____                 |
| _____                       | _____  | _____          | _____                 |

**D. Sign the following statement:**

I hereby petition to participate in the Exchange Scholar Program and to undertake the course of study outlined above. I agree to abide by the terms and conditions of this program as well as the regulations and procedures of both institutions. I understand that violation of any of the regulations can result in my suspension from the program. I authorize the Host institution to send a transcript of my studies to my Home institution.

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|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|

**E. Obtain the signed approval of the following individuals at your home institution:**

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| Name | Title | Signature | Date |
|------|-------|-----------|------|
|------|-------|-----------|------|

**1. Academic Adviser**

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**2. Director of Graduate Studies or Department Chair**

**3. Graduate School Dean or Designated Officer**

**4. Other** (if applicable)

**F. Leave this form with your Graduate School Dean for processing.**

\*\*If you will require special assistance or accommodations during your stay, please discuss your needs with your Accessibility Coordinator.

**G. Graduate School Dean:**

Please forward this application to the Exchange Scholar Program coordinator at the institution the student plans to visit.

**H. Host institution coordinator:**

Please obtain the approval of the following persons for the student's proposed course of study at your institution.

| Name   | Title | Signature | Date |
|--|-------|-----------|------|
| <hr/>  |       |           |      |
| 1. <b>Academic Adviser</b> , if appropriate                |       |           |      |
| <hr/>  |       |           |      |
| 2. <b>Director of Graduate Studies or Department Chair</b> |       |           |      |
| <hr/>  |       |           |      |
| 3. <b>Graduate School Dean or Designated Officer</b>       |       |           |      |
| <hr/>  |       |           |      |
| 4. <b>Other</b> (if applicable)                            |       |           |      |
| <hr/>  |       |           |      |

## **PARTICIPATING INSTITUTIONS AND PROGRAMS**

### **University Of California at Berkeley**

*All Ph.D. programs* Contact: Maritsi Perez

Degrees Office, 318 Sproul Hall, #5900

Berkeley, CA 94720-5900

Phone: 510.642.7330

Fax: 510.643.1524

Email: maritsip@berkeley.edu

Academic calendar: <http://registrar.berkeley.edu/CalendarDisp.aspx?terms=current>

### **Brown University**

*All Ph.D. programs*

Contact: Thomas Lewis

Associate Dean of Academic Affairs

Brown University

Box 1867

Providence, RI 02912

Phone: 401.863.2843

Fax: 401.863.3471

Email: thomas\_lewis@brown.edu

Academic calendar: <http://www.brown.edu/Administration/Registrar/calendar.html>

### **University of Chicago**

*All Ph.D. programs*

Contact: Martha Sykes

Director of Operations

UChicagoGRAD

970 E. 58<sup>th</sup> Street, Room 303A

Chicago, IL 60637

Phone: 773.702.0871

Fax: 773.702.1194

Email: mjackso@uchicago.edu

Academic calendar: <http://www.uchicago.edu/academics/calendar>

### **Columbia University**

*All Ph.D. programs*

Contact: Andrea Solomon

Vice Dean and Dean of Academic Affairs

Columbia University

109 Low Library

535 West 116<sup>th</sup> Street, MC4304

New York, NY 10027

Phone: 212.854.2861

Fax: 212.854.4912

as660@columbia.edu

Academic calendar: <http://www.registrar.columbia.edu/academic-calendar/6>

**Cornell University**

*All Ph.D. programs*

Contact: Anne Haessner, Registrar

Cornell University

143 Caldwell Hall

Ithaca, NY 14853-2602

Phone: 607.254.4561

Fax: 607.255.1816

Email: [ah33@cornell.edu](mailto:ah33@cornell.edu)

Academic calendar: <http://www.cornell.edu/academics/calendar/index.cfm>

**Harvard University**

*All Ph.D. programs in the Graduate School of Arts & Sciences*

Contact: Patrick O'Brien

Graduate School of Arts & Sciences

Harvard University

1350 Massachusetts Avenue

Holyoke Center 350

Cambridge, MA 02138

Phone: 617.495.1814

Fax: 617.495.2928

Email: [gsas@fas.harvard.edu](mailto:gsas@fas.harvard.edu)

Academic calendar: <http://www.registrar.fas.harvard.edu/fasro/common/calendar.jsp>

**Massachusetts Institute of Technology**

*All PhD programs with approval of the host department*

Contact: Blanche E. Staton

Senior Associate Dean for Graduate Education

Office of the Dean for Graduate Education

77 Massachusetts Avenue

Room 3-138

Cambridge, MA 02139-4301

Phone: 617.253.4869

Fax: 617.253.5620

Email: [bestaton@mit.edu](mailto:bestaton@mit.edu)

Academic calendar: <http://web.mit.edu/registrar/www/calendar.html>

**University of Pennsylvania**

*All Ph.D. programs*

Contact: Monica Bradford

Graduate Division of Arts and Sciences

University of Pennsylvania

3401 Walnut Street, Suite 322A

Philadelphia, PA 19104-6228

Phone: 215.898.7444

Fax: 215.573.8068

Email: [monicabr@sas.upenn.edu](mailto:monicabr@sas.upenn.edu)

Academic calendar: <http://www.upenn.edu/almanac/3yearcal.html>

**Princeton University**

*All Ph.D. programs*

Contact: Elaine Willey

Assistant Dean for Academic Support Programs

Princeton University

Clio Hall

Princeton, NJ 08544

Phone: 609.258.3033

Fax: 609.258.6180

Email: [ewilley@princeton.edu](mailto:ewilley@princeton.edu)

Academic calendar: <http://registrar.princeton.edu/academic-calendar/>

**Stanford University**

*All Ph.D. programs (except those in Graduate School of Business and Stanford Law School)*

Contact: Judith Haccou

Director of Admissions

Stanford University

630 Serra Street, Suite 120

Stanford, CA 94305-6032

Phone: 650.725.2547

Fax: 650.723.8371

Email: [judith.haccou@stanford.edu](mailto:judith.haccou@stanford.edu)

Academic calendar: [http://registrar.stanford.edu/academic\\_calendar/index.html](http://registrar.stanford.edu/academic_calendar/index.html)

**Yale University**

*All Ph.D. programs*

Contact: Jasmina Besirevic Regan

Assistant Dean

Yale Graduate School of Arts and Sciences

P.O. Box 208236

New Haven, CT 06520

Phone: 203.432.5127

Email: [jasmina.besirevic@yale.edu](mailto:jasmina.besirevic@yale.edu)

Academic calendar: <http://www.yale.edu/calendars/>



## **Terms and Conditions**

The following are to be regarded as minimal terms and condition of the program. Individual institutions may choose to establish more rigorous criteria, e.g., for eligibility or duration of study. Definitions (e.g., of “term” “academic year”, and “hospitalization coverage”) may also vary according to local policy and practice.

1. **ELIGIBILITY** – normally students will be eligible to be Exchange Scholars only after they have completed one full academic year in residence in a graduate degree program at their home institution.
2. **DURATION** – a minimum of one term of study and a maximum of one academic year will be permitted in the program. The operation of this program during the summer sessions will be at the discretion of the host and home institutions.
3. **REGISTRATION STATUS** – Exchange Scholars will be registered by the home and host institutions in whatever category (“in absentia”, “in residence”, “special student”, “Exchange Scholar”) or appropriate at each place.
4. **TUITION AND FINANCIAL AID** – tuition will be charged and collected, and any financial aid will be provided by the student’s home institution.
5. **HEALTH AND HOSPITALIZATION COVERAGE** – the institution which the student is visiting will be responsible for assuring that hospitalization and health services are locally available. However, the host institution may either charge the student for such services or require that the student purchase coverage from the home institution.
6. **BENEFITS** – at the institution visited, Exchange Scholars will be accorded all the benefits of that institution’s resident students. They will receive a student ID card which permits access to the host institution’s libraries, labs, health facilities, athletic facilities, housing (as available) and the like. Where these services entail fees in addition to tuition, the host institution will charge Exchange Scholars the same fees it charges its own graduate students.
7. **INTERNATIONAL STUDENTS** – international students are understood to be under the continuing sponsorship of their home institution. All US Immigration Services work for them must be done through the international student advisor at the home institution. International students on F-1 visas should note that they are not allowed to work at the host institution unless they obtain prior written approval from the Visa Office at the host institution.
8. **RECORDS** – upon completion of each term, officials of the institution visited will collect the information concerning the Exchange Scholar’s course of study and forward it (with appropriate stamps/seals and signatures) to the Graduate School Dean of the student’s home institution. Normally, this information will include the course record (title, number, instructor, credit or class hours and grade received) and any special research conducted under the auspices of a faculty member. The information will then be posted on the student’s academic record or made part of the record as appropriate to the home institution.
9. **NOTIFICATION** – the home institution will be responsible for notifying third parties of the Exchange Scholar’s status and activities.