**Norm and Sibby Whitten Research Fund – Application Form**

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| **APPLICANT INFORMATION** |
| Last Name: | First: | M.I.: |
| Country of Citizenship (and Indigenous affiliation, if applicable): |
| Street Address: | Apartment no.: |
| City: | State: | ZIP code: |
| Country: |
| Phone (incl. country code): | e-mail: |
| University: | Country: |
| Department: |
| Supervisor: | Degree sought: |
| Project title: |
| Host country: | Research site: |
| Proposed dates of travel (DD/MM/YYYY): | From:  | To:  |
| Are you a member of SALSA: | Yes  | No  |
| Is your advisor a member of SALSA: | Yes  | No  |

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| **EDUCATION** |
| University: | Country: |
| Major(s): |  |
| Undergraduate degree: | Graduation date: |
| University: | Country: |
| Major(s): |  |
| Graduate degree: | Graduation date: |

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| **FELLOWSHIPS, AWARDS, and HONORS** (years awarded) |
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| **PAST RESEARCH EXPERIENCE** (dates: from - to) |
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| **LANGUAGE ABILITY** (indicate language ability as either: Native, Excellent, Good, Fair, or Minimal) |
| **Language** | **Spoken** | **Written** | **Reading comprehension** |
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| **ALTERNATIVE SOURCES OF SUPPORT** |
| **Program/Agency name** | **Accepted / Pending / Rejected** | **Amount (in US$)** |
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| **HOST COUNTRY CONTACT** |
| Country: | Institution: |
| Name: |  |
| Position: | e-mail: | webpage: |

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| **DISCLAIMER and SIGNATURE** |
| **I certify that my answers are true and complete to the best of my knowledge.** |
| Signature: | Date: (DD/MM/YYYY) |