

Asia Fellows Program Application

Deadline: For **January 2022** admission, please apply by **August 18, 2021.** Decisions will be made by **October 1, 2021.** [*Note: Submitting this application does not guarantee acceptance as a visiting fellow*]

Please attach a passportsize photo here.

Please Print or Type. There are two pages to complete plus the supplement for international applicants. In addition we need a 3-5 page research proposal, 2 letters of recommendation, and your CV/resume.

Important Note: The Asia Fellows Program is designed for visitors with independent research agendas. It is generally not appropriate for those who seek regular supervision or consultation by Ash Center/HKS faculty, whose own research demands may limit their availability to meet with visiting fellows. *Candidates who would require a "faculty supervisor" are advised to consider alternative opportunities at other institutions.*

Full legal name (as it appears on you	passport)	
First/GIVEN Name	Family/Last Name	
☐ Female ☐ Male		
Current Position (Title and Orga	ization):	ear)
Highest Academic Degree (Type or	degree and field, year awarded, University):	
Proposed Research Topic:		
Period of Affiliation:		
☐ Full Calendar Year (Jan 2022 – De	2022)	
Other	(Please attach an explanation of why you cannot attend for the full academic year)	
, s	lars programs at Harvard to which you are/will be applying:	
Home Address		
City, State, Postal Code		_
Home Telephone	Cell/Mobile	
Work Address		
Work Telephone	City, State, Zip	

Preferred Email						
Preferred postal mail address:	Home	Work \square				
Preferred telephone #:	Home	Work 🗆	Cell 🗆			
Permanent U.S. Resident:	Yes 🗆	No \square				
Birth Date (Month/Day/Year)			_ (Citizenship		
US Social Security #		(If ap	oplicable)			
☐ I am applying for a Harvar	d sponsored vis	sa (If checked, ple	ase fill out P	Page 3, the supplement for int'l applicants)		
Professional References (Name, should be submitted with applicat		none, e-mail) Lett	ers of recom	mendation from references familiar with your	vork	
1. Name	Addr	·ess		(Telephone)		
Email:						
2. Name				(Telephone)		
Email:						
*Academics (full-time faculty/P *Practitioners (anyone who is n	h.D. students/p ot a full-time ac WS FEES CAI	ostdocs): \$7,000 cademic affiliate NNOT BE WAIV	/year or \$4,0): \$10,000/yo /ED OR DIS	ear or \$7,000/semester SCOUNTED. FELLOWS ARE RESPONSII	3LE	
I certify that the information prov I understand that any inaccurate o further consideration for admissio	r misleading inf	ormation or omis	sion will be o	cause for disqualification from		
SIGNATURE			DATE	:		
In addition to this application fo	orm, your appli	cation should in	clude:			
 □ Research Proposal (3 to 5 pa □ CV or Resume □ Two (2) letters of recommen □ Supplement for International 	dation who are					

2

Please email all application materials to: Laura ma@hks.harvard.edu

Supplement for International Applicants (Page 1 of 2 pages) English Proficiency How many years have you formally studied English? No 🗆 Do you speak English in your professional work? Yes If yes, how frequently and for how many years? Please rate your English abilities in the following areas (use the following descriptions: Fluent, Conversant, Sufficient, Needs Work) READING _____ WRITING ____ SPEAKING_____ LISTENING_____ **Visa Information** What is your current visa status (if any)? Are you planning to apply for a Harvard sponsored visa? Yes \square No \square If no, please indicate which institution is sponsoring your visa: Marital Status: Married Yes No No Yes No No If married, will your spouse (and/or children) accompany you to the United States? When will your spouse and/or children join you? _____ Please provide information on each family member who will accompany you to the US or join you later: Place of Birth Name Relationship Date of Birth Citizenship Have you ever been in the US before? Yes \square No \square If yes, please give the dates: Type of visa _____ Type of visa _____ Please include a copy of all of your accompanying family members' passports (including yours)

S	Supplement for Intern	ational Applicants (Page 2 of 2 page	ges)
		d Kennedy School as a Rajawali Fellow, and of funds available for your support at Harva	
☐ Personal Funds	Amount US\$	Deposited in which US Bank?	Anticipated
☐ US Government	Amount US\$	Deposited in which US Bank?	Anticipated
☐ Foreign Government	Amount US\$	Deposited in which US Bank?	Anticipated ☐ Confirmed ☐
☐ Other Organization	Amount US\$	Deposited in which US Bank?	Anticipated
☐ Other Sources	Amount US\$	Deposited in which US Bank?	Anticipated
TOTAL AMOUNT OF AL	L SUPPORT: US\$		
		or a full year (12 months) for individuals mu, the Fellows Program fee, and if applicable,	
		or a full year (12 months) for Fellows with facts not include, the Fellows Program fee, and	
	ard and stipulating the te	by an organization or agency must supply rms of the award with specific dollar amount the application.	
		on given by me in this Supplement is accura denial or revocation of admission.	te in every respect, and I

Please email all materials to: Laura ma@hks.harvard.edu

Date: _____