

# International Visiting Scholar Program Application

Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home Institution: \_\_\_\_\_ Department: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Visa Status: \_\_\_\_\_

Date of Birth: Day \_\_\_\_\_ /Month \_\_\_\_\_ /Year \_\_\_\_\_ Ethnicity: \_\_\_\_\_

## Language Skills

_____ English _____	Read	Speak	Translate	_____	Read	Speak	Translate
_____	Read	Speak	Translate	_____	Read	Speak	Translate

## Emergency Contacts *(please provide two)*

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*Please continue to the next page.*

## Scholar Type

I am applying to be a:

Clinical Observer (maximum three months)

Research Scholar (minimum six months up to two years)

If you are applying to be a Research Scholar, include your five-page research proposal as described on the [Professional Training page](#) on the UCSF Memory and Aging Center website. We may request three letters of recommendation once your application is reviewed.

## Start and End Dates

**Preferred start date:** Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

**Preferred finish date:** Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

## Funding

Visiting scholars must be self-supporting, and the source of funding/payment for the visit must be identified before acceptance to the program. Candidates who demonstrate a strong interest or record of leadership in dementia research or clinical work may apply for limited financial assistance.

If accepted, my visiting scholar rotation will be funded by:

Self-funded

Funded by grant or institution (please name) \_\_\_\_\_

If funded by a grant or institution, please attach a letter of support from the funding agency or institution indicating the amount of funding allocated.

How did you hear about this opportunity? \_\_\_\_\_

Please send *all* of the following to [MAC.VisitingScholarProgram@ucsf.edu](mailto:MAC.VisitingScholarProgram@ucsf.edu):

1. Completed application form (this form)
2. Curriculum vitae
3. One-page description of your area of interest and research/clinical training goals

Please carefully review the [Professional Training page](#) on the UCSF Memory and Aging Center website for additional information about the International Visiting Scholar Program.