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| **Associate Program**  Application Form  **Application Deadlines:  April 15 & October 15** | *Applicants should apply at least 3 months prior to intended arrival. Please submit application to the below email address.*  Email: [hyiprog@fas.harvard.edu](mailto:hyiprog@fas.harvard.edu)  Web: <http://www.harvard-yenching.org> |

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| **Application Form - *Please type or write in black ink*** | | | | |
| **APPLICANT INFORMATION** | | | | |
| Family name: | | | Given name: | |
| 姓名: | | Age: | | Gender: |
| Place of birth | City: | | Province: | Country: |
| Date of birth (Month/Day/Year): | | | | |
| Citizenship (nation from which passport is obtained): | | | | |
| Present title as faculty member: | | | | |
| University: | | | Department: | |
| Office address: | | | | |
| Home telephone: | | | Office telephone: | |
| E-mail: | | | Fax: | |
| Best mailing address: | | | | |

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| **EDUCATION** | | | |
| **Colleges/Universities Attended** | **Principal Subject** | **Dates of Study** | **Degree/Year Awarded** |
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| **RECOMMENDATION** | |
| *Please list the name and department of the Harvard faculty member from whom you are requesting a recommendation* | |
| **Name** | **Department** |
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| **DATES OF STAY/FUNDING** |
| Proposed dates of stay: |
| What is the source of funding for your research stay at Harvard? |
| Please indicate your previous affiliation with the Institute, including dates of stay: |

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| **RESEARCH PLAN** |
| What is the subject of your research plan? Give a description in English in about 3-5 pages. Please include your statement with the application form. |

**Please provide a CV (curriculum vitae), in English, including:**

* Honors (previous fellowships, scholarships, grants and other honors)
* Employment (All positions held, academic or other, in chronological order, with dates. Include the date from which you have held your present faculty position)
* Publications (please list titles in the original language as well as English)