



**Office of Diversity, Equity and Inclusion**

**Application**

**Diversity Abroad Honors Scholarship Program (DAHSP)**

**AY 2017-18**

**The Application Process**

**Step One:** The student and Study Abroad Advisor shall complete the "Student Information" section of this form after reviewing the program guidelines.

**Step Two:** The Study Abroad Advisor should complete the "Study Abroad Advisor" section below.

**Step Three:** The student shall submit a 1-2 page essay describing the purpose of the study abroad experience and what he/she hopes to achieve (*examples include language acquisition, cultural immersion, cultural competencies in a global setting, STEM research project, etc.*).

**Step Four:** The student shall obtain one (1) faculty or department recommendation to include in the packet.

**Step Five:** The completed application and supporting documentation shall be approved and submitted to the SUNY Office of Diversity, Equity and Inclusion through the Study Abroad or International Studies Program officer on campus, or the Vice President for Academic Affairs (VPAA).

**STEP ONE: STUDENT INFORMATION**

Name (*please print*): \_\_\_\_\_ Student ID #: \_\_\_\_\_

Identify your intended study abroad program or global research experience. Provide the name of the sponsoring SUNY campus and the Program Name:

Study Period: Fall \_\_\_\_\_ Winter \_\_\_\_\_ Intercession \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Other \_\_\_\_\_

Student's College E-mail Address: \_\_\_\_\_

Departmental Major: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_ (4.0 scale)

Current Academic Standing: \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior

Understanding of Student Responsibility:

**Post Travel Program Report:** Students receiving DAHSP funding agree to submit a summary of their experience, detailing how it contributed to career and college goals within 60 days of completing their travel to the Office of Diversity, Equity and Inclusion.

**Mentor/Ambassador:** Scholarship recipients may be asked and must be willing to share their travel experience in a college or conference forum.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**STEP TWO: TO BE COMPLETED BY STUDY ABROAD ADVISOR/OFFICER OR VPAA**

S/A Advisor: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Campus Financial Officer Name: \_\_\_\_\_ Email: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

The Study Abroad Office has verified and included:

- **One (1) recommendation** from departmental faculty, academic advisor or research coordinator
- **The Study Abroad Officer or VPAA at \_\_\_\_\_ (SUNY Institution) nominates the student named above for a Diversity Abroad Honors Scholarship Program award.**
- **Study Abroad Officer or VPAA Authorized Signature:** \_\_\_\_\_

*Note: Awards through this program require matching funds from the campus equal to or greater than the Diversity Abroad Honors Scholarship Program award provided by the SUNY Office of Diversity, Equity and Inclusion. ODEI will award up to \$1,000 per scholarship.*

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**STEP THREE: STUDENT'S ESSAY OR STATEMENT**

Instructions: The student shall submit a 1-2 page essay or reflection on the anticipated study abroad goals – or what he/she hopes to achieve through the study abroad experience (*examples include cultural/language immersion, STEM-research or study, travel, cultural competencies in global settings, etc.*).

Student Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

(Print) Name of Reference: \_\_\_\_\_ Department: \_\_\_\_\_

Email: \_\_\_\_\_ Campus: \_\_\_\_\_

**STEP FOUR: RECOMMENDATION LETTER**

The student shall obtain one (1) faculty or department recommendation to include in packet.

**STEP FIVE: PROPOSAL SUBMISSION & DEADLINE**

Please submit the completed application packet to the **Office of International Education and Global Initiatives in Old Champlain 240**. The deadline for receipt of applications is **October 2, 2017 by 4 p.m.** (for study in winter or spring 2018) and **March 2, 2018 by 4 p.m.** (for study in summer or fall 2018).

Dr. Carlos Medina  
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Office of Diversity, Equity and Inclusion  
State University of New York  
State University Plaza, South Tower 8<sup>th</sup> Floor  
Albany, New York 12246  
Telephone: (518) 320-1189 Fax: (518) 320-1555

**To the Student :**

This academic reference should be given to a professor, faculty advisor or internship coordinator who knows you well and is able to judge your academic qualifications for study/research abroad. It should become part of the application package submitted by your Study Abroad Coordinator or Vice President for Academic Affairs as part of your DAHSP application.

Name of Reference: \_\_\_\_\_ Email: \_\_\_\_\_

**To the Reference:** *Please return this form to the Study Abroad International Education Office or VPAA for the sponsoring campus.*

The student named below is applying for SUNY's research/study abroad academic scholarship program. We would appreciate your assessment of the applicant's strengths.

Student's Name: \_\_\_\_\_ Proposed Study Abroad Program: \_\_\_\_\_

Has this student enrolled in your classes or department? \_\_\_\_\_ Please describe how have you known the student named above?

<b>Academic attributes</b>	<b>Excellent</b>	<b>Very Good</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>No Evaluation</b>
Competence in major or specialization	~	~	~	~	~	~
Academic interest and motivation	~	~	~	~	~	~
Capacity for independent study	~	~	~	~	~	~
Resourcefulness	~	~	~	~	~	~
Reliability	~	~	~	~	~	~
Integrity	~	~	~	~	~	~
<b>Non-academic attributes</b>	<b>Excellent</b>	<b>Very Good</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>No Evaluation</b>
Level of maturity	~	~	~	~	~	~
Ability to adapt to unstructured circumstances	~	~	~	~	~	~
Self-confidence and self-esteem	~	~	~	~	~	~
Ability to relate well to others	~	~	~	~	~	~
Emotional stability	~	~	~	~	~	~
Open-mindedness	~	~	~	~	~	~
Integrity	~	~	~	~	~	~

**Please provide a review of this candidate's ability to represent their home campus in a study/research abroad program, as well as challenges the student may face. You may attach a letter of recommendation or use the space below and on the reverse side of this page to provide your comments.**

Reference Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Department: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_