



The Tibet Fund

TIBETAN SCHOLARSHIP PROGRAM

Application for higher studies in the US under the Tibetan
Scholarship Program
Funded by Department of State, US Govt.

1. Name: (As it appears in Travel Document & Academic Records)

Title (Mr. / Ms.)	Family / Surname	Given Name(s)	Middle Name(s)
_____	_____	_____	_____

2. Father's Name: _____ Mother's name: _____

3. Address: _____

E-mail: _____@_____

3. (A) Date of Birth: (MM/DD/YYYY) _____ / _____ / _____

3 (B) Place of Birth: _____ 3 (C): Country of Birth: _____

4. Gender: (Male / Female): _____

4 (A) Marital Status: _____ 4 (B) If married Spouse Name: _____

5. Application cycle. Semester and Year you desire to begin studies:
 Fall _____ Spring _____
 Year Year

6 MAJOR: _____

7. SPECIALIZATION (Explain in brief): _____

8. **DEGREE OBJECTIVE** (Master's / Non Degree): _____

9. **EXAMINATION RESULTS.** Indicate which tests you have taken by ticking () the appropriate boxes and include the test dates and the scores earned.

TEST	DATE (mm/yy)	TOTAL SCORE
<input type="checkbox"/> TOEFL (Computer Based)	_____ / _____	L: ____; SW: ____; R: ____; T: _____
<input type="checkbox"/> TOEFL (computer-based)	_____ / _____	_____
<input type="checkbox"/> GRE General Exam	_____ / _____	A: ____; Q: ____; AW: ____
<input type="checkbox"/> GRE Subject Exam: _____	_____ / _____	_____
<input type="checkbox"/> GMAT	_____ / _____	V: ____; Q: ____; TS: ____; AWA: ____

Please make sure that your GRE Score reaches the DoE / The Tibet Fund by end of October.

10. Check here if you have been convicted of a felony crime. (Required question.)

11. Check here if you have been dismissed from any university for disciplinary reasons. (Required)

12. Check here if you have been dismissed from any university for academic reasons. (Required)

13. Check here if you wish to identify yourself as physically or learning disabled. (Optional question.)

14. EDUCATIONAL HISTORY

List educational institutions attended in reverse chronological order (start with your current school or the school most recently attended).

Institution and Location	Major Field of Study	Dates of Attendance (Month / Year)		Actual Name of Degree / Diploma (Do not translate)	Date Received / Expected
		From	To		
		/	/		/
		/	/		/
		/	/		/
		/	/		/

15. List **scholarships or fellowships** held at present or in the past (Give source or sponsor, amount, where held, and duration.)

Institution	Award for	Dates (Month / Year)	
		From	To
		/	/
		/	/
		/	/
		/	/

16. Indicate any **academic honors or prizes** which you have received, with titles and dates.

17. List any **Books, Articles or Theses published by you**, especially in your proposed field of study. (Give title, place and date of publication.)

18. List **Professional Societies, Fraternities** or other organizations in which you now hold membership or in which you have been active in the past. (Indicate if you have held an elective office.)

Institution and Location	Position	Dates of Attendance (Month / Year)	
		From	To
		/	/
		/	/
		/	/
		/	/

19. **Teaching Experience.** (Include any teaching positions you have held or currently hold.)

Institution and Location	Position	Dates of Attendance (Month / Year)	
		From	To
		/	/
		/	/
		/	/
		/	/

20. **Research.** (Include any research you have completed or in which you are currently involved.)

21. **Extracurricular Activities.** (List any extracurricular (non-academic, non-work activities) in which you have been or are currently involved.)

22. **Occupational Experience.** Identify your current position / occupation.

Institution and Location	Position	Dates of Attendance (Month / Year)	
		From	To
		/	/
		/	/
		/	/
		/	/

How many years of full-time employment have you had? _____.

What is your current position: _____.

Certification Statement and Signature

Read and sign the following certification statement. Your application cannot be reviewed if you do not sign this statement.

I certify that all information on this application form is true to the best of my knowledge. I certify that all accompanying documents (transcripts, certificates, diplomas, essays, references, etc.) are authentic, true and accurate to the best of my knowledge. I understand that withholding or omitting information, providing false information, or submitting fraudulent and/or falsified documents may make me ineligible for selection or subject to dismissal by the HLSC.

Last Name: _____ First Name: _____

Applicant's Signature _____ Date _____

For more information please contact:

High Level Scholarship Committee
c/o Department of Education; Gangchen Kyishong
Dharamsala – 176215; (H.P.) India
Tel.: 01829 222572; Fax: 01892 223481
E-mail: scholarship@gov.tibet.net

STUDENTS LIFE HISTORY

APPLICANT NAME: _____

APPLICANT NAME: _____

DEPARTMENT / MAJOR: _____

DEGREE: _____

ESSAY:(Attach additional pages if necessary.)

STUDENTS ACADEMIC ACHIEVEMENTS AND ASPIRATIONS

APPLICANT NAME: _____

DEPARTMENT / MAJOR: _____

DEGREE: _____

ESSAY: (Attach additional pages if necessary.)