

**UCLA African Studies Center**  
*THE JUDITH BOYAJIAN TRAVEL FELLOWSHIP*

**Application checklist**

- Application form (completed and signed)
- Statement of Purpose
- Statement of previous experience in Africa (if applicable)
- Letters of recommendation
  1. \_\_\_\_\_
  2. \_\_\_\_\_
- Letter of commitment from organization/association hosting your public service component
- Copy of Transcript or official Degree Progress Report (DPR)

**Deadline Friday, February 16, 2018**

***Submit completed application by midnight Friday, February 16, 2018.***

*Application packets can e-mailed to:*  
[africa@international.ucla.edu](mailto:africa@international.ucla.edu)

Hand delivered:  
10244 Bunche Hall (10<sup>th</sup> floor)

# APPLICATION FORM

## I. Personal Data

Name:

\_\_\_\_\_  
(Last) (First) (Middle)

UCLA Department: \_\_\_\_\_

UCLA Student ID#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Male:  Female:

Address (to be used for selection notification decisions):

\_\_\_\_\_  
(Street) (Apt)

\_\_\_\_\_  
(City) (State) (Zip)

Current Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_  
(area code) (number) (area code) (number)

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

## II. Academic Data

Graduate applicants

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

Focus: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_

Undergraduate applicants

Major: \_\_\_\_\_

Minor: \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_

## III. Language

Please describe your African language ability, if any (spoken, written, comprehension):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## IV. Previous Experience (if applicable)

Describe any previous experience in Africa (name of program; countries; dates)

## V. Statement of Purpose

Please provide an essay of no more than 2 single-space pages explaining, in detail, your research/study plans for the summer. **You must identify your host institution AND your public service component and how that ties in with your project.** Discuss how your academic, career and personal objectives relate to your program abroad.

**AUTHORIZATION FOR RELEASE OF ACADEMIC, FINANCIAL AND PERSONAL INFORMATION**

I certify that all of the information reported in my application packet is true and complete to the best of my knowledge. I authorize the release of my academic and personal information by the African Studies Center to the fellowship sponsor and to the selection committee for the purpose of being considered for the fellowship. If I am selected as a recipient, I authorize the release of my personal information for the purposes of publicity and recognition. If I am selected as a recipient, I also agree to write a report and submit it to the African Studies Center office within a month of the official end of my program, and acknowledge that if I do not submit this report by the prescribed deadline, the African Studies Center may place a "hold" on my transcript. This report will describe my experiences while abroad and how studying/working abroad affected me. I agree to permit the African Studies Center to share my report with the fellowship donor and to use my report, or portions of the report, in publicity materials.

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Print Name

Date

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Signature