



**Summer Research Program 2016**  
**Host institution: The University of Texas at Dallas (UT Dallas)**

(This program is co funded by the U.S. Embassy in Mexico and The University of Texas at Dallas,  
and administered by ANUIES)

**APPLICATION FORM**

**INSTRUCTIONS:**

- **Read ALL the application form carefully** before filling it out.
- **Download** the application form to your computer. **Save** it in your hard disk with your **two last names as the file name**. Example: gonzalezarroyo.doc
- **Fill out** the application form electronically. TYPE IN THE WHITE SPACES ONLY.
- **Send** your completed form as an e-mail attachment to [utd2016@anuies.mx](mailto:utd2016@anuies.mx)  
**No later than February 21, 2016 by midnight.**  
In the subject line, please write “**Application: Summer research program UTD 2016.**”
- You will receive a confirmation e-mail acknowledging receipt of your application. **If you do not receive a response within three working days, please re-send until you receive notification.**
- Your application and enclosures **should not exceed 3 MB**. Otherwise, it will not clear the Firewall.

**Part 1 – Personal information**

<b>a) Full name (exactly as printed in your passport - if available - or birth certificate)</b>		
Last name	Mother's maiden name	Name(s)
<b>b) Home address and contact information</b>		
Street and number		
Colonia / Fraccionamiento		Delegación / Municipio
City	State	Country and ZIP Code
(Area code)	Phone number	e-mail address
(Area code)	Cellular phone number	
<b>c) Date of birth</b>		<b>Place of birth</b>
mm / dd / yyyy		city, state
<b>d) Country(ies) of citizenship</b>		<b>Gender</b>



<b>e) Medical, physical, dietary or other personal considerations</b>					
<b>f) Will your current medical insurance cover you in the U.S.?</b>					
Yes (if selected, you will be required to submit proof).			No		
<b>g) Passport number (if available)</b>		<b>Expiration date</b>		<b>Do you have a valid U.S. visa?</b>	
		mm / dd / yyyy		Yes No	
<b>h) Emergency contact:</b>					
name		relationship		e-mail address Cell number	

## Part 2 – Higher Education Institution

<b>i) Field of study and semester you are currently attending</b>					
Research interest					
<b>j) Institutional affiliation</b>					
Name of institution					
Street and number					
Colonia / Fraccionamiento			Delegación / Municipio		
ZIP Code		City		State	
(Area code)	Phone number		Web site		
<b>k) Previous travel study experience in the United States (begin with most recent)</b>					
Dates		Type of travel (business, vacation) / Title of studies or research	Cities and/or states / school or institution	Supported by U.S. government (Check)	
From mm/dd/yyyy	To mm/dd/yyyy			Yes	No



<b>I) Proof of language proficiency (please enclose copies of test results)</b>					
Date taken (mm/dd/yyyy)	Name of examination			Score or grade obtained	
<b>J) Health issues – please document below if you have any conditions that require special attention, including dietary, physical or other restrictions. This will not affect the selection process but the host institution needs to be aware of this information.</b>					
I have no serious conditions or restrictions to report:					
Please be advised of the following medical conditions or other restrictions:					
<b>IMPORTANT: I certify that the information I have provided is true and accurate to the best of my knowledge. I understand that misrepresentation of information may lead to immediate dismissal of my application or from the program if selected as a finalist. My typed name below is to be considered as the electronic equivalent of my signature.</b>					
Full name			Date of application mm/dd/yyyy		

Your application should be accompanied by:

- Two letters of recommendation from your professors.
- CV in English
- Transcripts up to the previous semester including your GPA
- Home institution's letter of endorsement
- ITOEFL or equivalent proof of English language proficiency
- An essay documenting your research interests, why you would like to participate in this program and your expectations. It should be a maximum of two pages, double spaced, in Times New Roman 12 font. This is a critical part of the application so we encourage applicants to document substantively.
- Copy of your passport (If available. **It is not a requirement for application.**)



## Summer Research Program 2016 – UT Dallas

### Checklist

<b>Student's full name:</b>		
<b>Institution where currently enrolled:</b>		
<b>Degree pursued and current semester:</b>		
<b>Program's dates:</b>	June 5 – July 30, 2016	
<p align="center"><b>Please submit the application form and all required documents to:</b>  <a href="mailto:utd2016@anuies.mx">utd2016@anuies.mx</a>  <b>by February 21, 2016</b></p>		
	<b>Required documents</b>	<b>included</b>
<b>1</b>	Application form	
<b>2</b>	Two letters of recommendation	
<b>3</b>	Curriculum Vitae in English	
<b>4</b>	Transcripts including overall GPA up to last semester	
<b>5</b>	Home institution's letter of endorsement	
<b>6</b>	Evidence of English language proficiency, e.g. ITOEFL or equivalent	
<b>7</b>	Essay in English	
<b>8</b>	Copy of passport (if available, not a requirement)	

**Note:**

As a rule, incomplete applications will not be considered. However, if you are missing one or more required documents for reasons well beyond your control, please provide an explanation below and when can they be expected.

U.S. Embassy – ANUIES – UT Dallas