

Application Deadline: December 1, 2010

2011 OBUCHI STUDENT SCHOLARSHIP APPLICATION

Please refer to the instruction booklet to complete this form and to check for specific requirements in addition to this form. Print or type answers.

1. Type of application: <input type="checkbox"/> New <input type="checkbox"/> Reapplying (specify category and year of last application) _____		2. <h1 style="text-align: center;">OBUCHI SCHOLARSHIP</h1>										
3. Family name			Given name		Middle name(s)		Other name(s)		4. UH Student ID #		5. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
6. Complete current or local mailing address including Street and Apt #, City, State/Country, Postal code								7. Last day at this address: (month/day/year)				
8. Complete permanent address including Street and Apt #, City, State/Country, Postal code								9. If not U.S. citizen but currently in U.S. indicate visa status: <input type="checkbox"/> J <input type="checkbox"/> F <input type="checkbox"/> Other _____				
10. Birthdate (month/day/year)			11. Birthplace (city/state/country)			12. Country of citizenship			13. Country of permanent residence			
14. office phone #		home phone #		cell phone #		FAX		15. E-mail address:				
16. Have you received a scholarship administered by the EWC before? If so, when and what type?						17. Have you participated in a program at the EWC? If you have, specify dates and program.						
18. List in order of your attendance all colleges/universities in which you have enrolled. Include the one in which you are currently enrolled, if any. Begin with the most recent institution. Please do not write in the far left column.												
Name of institution			Location (City, State or Country)		Date From MM/YY To MM/YY		Major		Degree earned or expected (BA, MS)		Date received or expected MM/YY	
19. I am presently <input type="checkbox"/> enrolled as a: <input type="checkbox"/> classified (degree-seeking) student at _____ <input type="checkbox"/> unclassified student at _____ or I am presently <input type="checkbox"/> employed as a: _____ at _____												
20. LETTERS OF REFERENCE Please do not write in the far left column.												
Name						Title and name of organization						
21. TEST/EXAMINATION REQUIRED (see instructions)						22. Indicate the Asia/Pacific language in which you are interested.						
GRE General		date taken		sent to		23. List other institutions to which you are applying:						
GRE Subject		_____		_____								
TOEFL		_____		_____								
IELTS		_____		_____								
GMAT		_____		_____								

*****PLEASE DO NOT WRITE BELOW THIS LINE*****

<input type="checkbox"/> GRE General	<input type="checkbox"/> UH App	<input type="checkbox"/> UH App
V = % Q = % A = % AW = %	<input type="checkbox"/> UH Dept App	
<input type="checkbox"/> GRE Subject	<input type="checkbox"/> Confidential Financial Statement	
<input type="checkbox"/> TOEFL	<input type="checkbox"/> Residency Declaration Form	
<input type="checkbox"/> IELTS	<input type="checkbox"/> PhD Sample/Writing Sample	
<input type="checkbox"/> GMAT	<input type="checkbox"/> Curriculum Vitae	<input type="checkbox"/> Essay
<input type="checkbox"/>	<input type="checkbox"/> UH App Fee	

24. I wish to pursue a _____ degree in _____ field of study at the University of Hawai'i.

25. **Consideration for independent UH Admission** Do you plan to attend the University of Hawai'i in the event that you do *not* receive an Obuchi Student Scholarship? Your response will not affect your fellowship application; it only informs us how to submit your UH application for processing. If yes, see instructions for information on how to submit application fee.

Yes No

26. List the countries in which you have traveled or resided (indicate places and dates).

27. List the titles of publications you have authored (indicate subject, date, and place).

28. List the scholarships, fellowships, or grants you have received.

29. List other scholarships and fellowships for which you are applying.

29. How did you learn about the Obuchi Student Scholarship? Check all that apply:

- | | |
|--|---|
| <input type="checkbox"/> Newspaper or magazine | <input type="checkbox"/> EWC staff (name: _____) |
| <input type="checkbox"/> Scholarship database | <input type="checkbox"/> Professor (name: _____) |
| <input type="checkbox"/> Internet search | <input type="checkbox"/> Current or former EWC fellow (name: _____) |
| <input type="checkbox"/> EWC web site | <input type="checkbox"/> EWC information session (location: _____) |
| <input type="checkbox"/> Educational advising office | <input type="checkbox"/> Graduate department/university (name: _____) |
| <input type="checkbox"/> Poster | <input type="checkbox"/> EWC Program Representative (name: _____) |
| | <input type="checkbox"/> Conference (name: _____) |
| | <input type="checkbox"/> Other: (please explain: _____) |

NOTE: To complete your application, review the EWC Application Information and Instructions for other required supporting documents.

APPLICANT'S CERTIFICATION

I hereby certify that the information I have given on this application is complete and correct to the best of my knowledge, and that I have attended no institution other than those listed on this application. I understand that the concealment of such information may result in the rejection of my application or disciplinary action if discovered after enrollment. I understand that it is my responsibility to arrange for the forwarding of official transcripts of records from all schools specified in the instruction booklet, and that such transcripts and other application materials become the property of the East-West Center and will not be returned to me. Further, I authorize access to and if necessary, release of my educational records of any academic work done at the University of Hawai'i as part of my department's evaluation of my application for an Obuchi Student Scholarship.

(Please be sure that photo copies of your application/documents needed for your own personal use are made BEFORE submitting them to the East-West Center.) The East-West Center WILL NOT make any photo copies of any materials submitted as part of your application.

Date _____ Signature of Applicant _____