



SCHOLARSHIP APPLICATION FORM

The **National Council on U.S.-Arab Relations (NCUSAR)** is pleased to offer students a partial scholarship opportunity for intensive Arabic language study with our partner organization in Muscat, Oman, the **Center for International Learning (CIL)**. Partial scholarships are available for intensive Arabic or study abroad, and thus can be used at virtually any time of the year. Scholarships are issued on a rolling basis throughout the calendar year.

Program details:

CIL will host you to study in the Sultanate of Oman, an Italy-sized nation on the Arabian Sea. For years students have found this an ideal setting for their international study, a nation of warm and welcoming people who practice a form of Islam – Ibadhism – that practices tolerance and acceptance of others. CIL provides students with the learning experiences needed to become world citizens.

Comprised of Americans and Omanis, many with PhD and Masters Degrees, the CIL faculty facilitates experiential education, cultural exchange, and comparative studies to deepen understanding, promote common interests, and explore the shared aspirations of people from different cultures. CIL offers students the chance of a lifetime—the kind of understanding that yields lasting friendship, tolerance and mutual respect.

CIL offers all three levels of Modern Standard Arabic (beginner, intermediate, and advanced), as well as Omani dialect, media Arabic, and skills classes. Arabic is one of the fastest growing languages learned by students in the U.S. Known for its fascinating complexity, it is a language of literature, poetry and elegant calligraphy. Arabic also is a language that encompasses deep and abiding cultural traditions, making its study a rich and rewarding learning experience.

CIL utilizes *Al Kitaab fii Taalum Al-Arabiya*, Part 1, 2 and 3, as well as other materials developed by the teaching faculty. Arabic instruction at CIL covers media literacy, comprehension, and active use of *lughat-al-muthaqqafeen* (“educated speech”), as used on Al Jazeera.

All of CIL’s Arabic language classes are taught by native Omani instructors trained in Teaching Arabic as a Foreign Language (TAFL). Students also can elect to enhance language learning through informal sessions with an individual Omani Language Partner (i.e., chatting, shopping at the souk, cooking, going to movies and other local events, such as village weddings).



Scholarship Details

For the 2014-2015 academic year, scholarships are available in these programs:

- Intensive Arabic language study (varying amounts of time)
- Study abroad semester (fall and spring)
- Summer ALIM (Arabic Language In Muscat)
- Winter break Arabic intensive

Eligibility:

All applicants must be enrolled in an accredited college or university in the United States, and must be in good academic standing. Eligible students will be required to complete the application process described below.

Application deadlines

Since the Center for International Learning (CIL) has a rolling admissions policy, we encourage you to apply early so that our study abroad program does not fill before the application deadline.

Fall semester: June 15 Spring semester: Nov. 15 Summer Term: March 15 Winter break: Nov. 1



A completed Scholarship Application includes the following items:

- 1) A résumé or curriculum vitae.**
- 2) A current official transcript.** Please use an official transcript provided by your college or university. Official transcripts may be mailed directly by the applicant's college or university, or mailed by the applicant if sealed by the appropriate college or university authority.
- 3) A one page (single-spaced) essay** describing your academic and personal reasons for choosing to study the Arabic language and, in particular, your desire to study in Oman.
- 4) Travel Documentation.** Please include a clear photocopy of your passport's personal identification page. All program participants must hold a current U.S. Passport which is valid for at least six months after your Oman program ends.
- 5) The following completed forms from this application (below).**
 - a) Applicant Information (page 4)
 - b) Arabic Language Experience (page 5)
 - c) Two References (page 6)*
 - d) Student Disclosure (page 7)
 - e) Institutional Approval of Student Participation (for Study Abroad) (page 8-9)
 - f) Insurance Notification (page 10)
 - g) Release and Indemnification (page 11)
 - h) Affiliation Contract (page 12)
 - i) Certification (page 13)

* Recommendation letters must address the following: applicant's academic profile; ability to work under pressure; adaptability to a new environment; and appreciation of different cultures.

Please submit all documents as hard copies and mail them to the address provided below.

To apply, all documents must be submitted via mail to:

**National Council on U.S.-Arab Relations
1730 M Street, NW, Suite 503
Washington, DC 20036**



Applicant Information

Applying for (check one): Winter 2015 Fall 2014 Spring 2014 Summer 2014

1. NAME: _____
Last First Middle Initial

2. DATE OF BIRTH: _____
MM/DD/YYYY

3. SEX: _____ 4. NATIONALITY: _____

5. EDUCATIONAL STATUS:

College or University Year Major Expected Date of Graduation

6. MAILING ADDRESS:

Street Address Apt./House number City

State Zip Code Country

7. HOME TELEPHONE: _____ 8. MOBILE TELEPHONE: _____

9. E-MAIL (school): _____ 10. E-MAIL (personal): _____

11. PERMANENT ADDRESS:

Street Address Apt./ House number City

State Zip Code Country

12. PASSPORT NUMBER: _____

13. EMERGENCY CONTACT INFORMATION:

Name Relationship Email

Home Phone # Mobile Telephone # Office/Professional Telephone #

Permanent Address

Doctor's Name Doctor's Phone #



Arabic Language Experience

1. Are you familiar with the Arabic alphabet and script? (Yes, No) _____

2. Please self-evaluate your level of proficiency in Modern Standard Arabic (Beginner, Intermediate, or Advanced).
 - a. Your spoken Arabic: _____
 - b. Your reading: _____
 - c. Your writing: _____
 - d. Your aural comprehension: _____

3. Please provide details on your previous Arabic study, if any.
 - a. Institution or program: _____
 - b. Period of study: _____
 - c. Hours of study per week: _____

4. Course level and book(s) used: _____

5. Level of proficiency attained as certified by institution (Beginning Arabic, Lower Intermediate Arabic, Higher Intermediate Arabic, Advanced Arabic): _____



References

Please have this form completed by two (2) professors or other individuals who can describe your academic ability and maturity. One of the forms should be from your Arabic instructor, if you have one. These recommendation forms should be included with your mailed application materials in sealed envelopes, or e-mailed directly from the recommender to NCUSAR.

1. APPLICANT'S NAME: _____
Last *First* *Middle Initial*

2. EVALUATOR'S NAME: _____
Last *First* *Middle Initial*

3. EVALUATOR'S POSITION: _____

4. How long have you known the applicant, and in what capacity?

5. This form aids in class placement and does not affect admission into the summer language program. If you are able, please evaluate this applicant's level of Arabic proficiency in the following categories (poor, fair, good, excellent):

a. Speaking _____

b. Listening _____

c. Reading _____

d. Writing _____

6. Please describe the applicant's maturity, cultural sensitivity, and his or her capability to adapt to life in another country:

7. Please add any comments that we should be aware of:

Please return this form in a sealed envelope to the applicant.



Student Disclosure

This section must be completed by the applicant:

1. We ask that you review the following statements carefully, check the appropriate space to indicate your agreement, and sign at the bottom of this section.

- I have spoken with my study abroad advisor academic advisor, and/or dean about my plan to participate in the Center for International Learning’s (CIL) study abroad program in Oman.
- I understand my college or university’s policy on credit transfer for this study abroad program in Oman.
- I know that I am expected to participate fully in all study abroad activities while enrolled in the CIL Oman program, regardless of whether my college or university will be transferring credit for the program. I understand that if I do not participate fully and appropriately, as determined solely by CIL officials, I may be put on academic probation or be asked to leave the program.
- I authorize CIL and my college or university to share my educational records with each other. Credits earned in Oman at CIL’s study abroad program are transferable only at the discretion of the receiving school.
- I understand that CIL will release my grade report to my school after I complete and submit a Program Evaluation.

2. A grade report and related materials to should be sent to: [your college registrar or study abroad office. We will also send a grade report to your permanent address.]

Name _____

Title _____ College/University _____

Address _____

City/state/country/postal code _____

Student Signature

Date

Name (please print) _____

Semester: Spring Fall Summer Winter 20__



Institutional Approval of Student Participation

To the Applicant’s Study Abroad Office:

_____ has applied to the study abroad program at the Center for International Learning (CIL) in Oman. We must receive this completed form before reviewing his/her application. CIL will forward a grade report and narrative evaluation upon successful completion of the program. We advise that all details regarding credit award and transfer be determined and finalized upon a student’s acceptance into the program.

The application of the student named above has the approval of this institution. After the student’s return, and upon receipt of the CIL grade report, the institution will evaluate credits earned by the student, and consider the appropriateness of transfer credit and/or the fulfillment of graduation requirements:

I have verified the institutional address below where the grade report should be sent.

Transfer credit for the above-named students will be evaluated upon return.

I understand that the Center for International Learning (CIL) will release of the student’s grade report after he/she completes and submits a Program Evaluation.

Course topic	# of credits	Other
Oman: Managing Modernity, Translating Traditions: Seminar	4	
Arabic Language	6	Beginner, Intermediate, Advanced levels offered
Independent Research Project	4	
Field Research Methods	2	

To the best of your knowledge, has this student ever been on academic or disciplinary probation?

Yes No



National Council on U.S.-Arab Relations

1730 M St., NW, Suite 503, Washington, DC 20036
Phone: 1-202-293-6466 | Fax: 1-202-293-7770
www.ncusar.org



Center for International Learning

Box 2644, PC 111, Muscat, Sultanate of Oman
Phone / fax: +968 245 510 41
www.omancenter.org

Applicant Name _____

Signature Name (printed)

Name of institution Academic department

Email

Phone Fax

Please use the following institutional contact in the event of a student or program emergency:

Name Name (printed)

Title Department

Email

Phone Fax



Insurance Notification

1. PARTICIPANT'S NAME: _____
2. NAME OF MEDICAL INSURANCE COMPANY: _____
3. INSURANCE POLICY NUMBER: _____
4. NAME OF GROUP (if insurance is a group policy; i.e: employer or professional organization):

5. PERIOD OF COVERAGE: _____
6. SIGNATURE OF PARENT OR GUARDIAN (if student is under 21): _____

7. DATE: _____



Release and Indemnification

I (We), the undersigned, (each of us), for myself (ourselves), my (our) heirs, executors, administrators, successors, and assigns, covenant and agree that I (we) will never sue, or bring, or in any way aid, any legal action, or proceeding against the Center for International Learning (CIL), the National Council on U.S.-Arab Relations (NCUSAR), or affiliated sponsors, their legal representatives, or any and all other persons for whose acts or to whom it might be liable, for any and all claims, demands, damages, costs, expenses and compensations, incurred by reason of failure and refusal of the undersigned to conform to the requirements of participants in the NCUSAR/CIL Program.

Further, I (we), the undersigned, (each of us), for myself (ourselves), my (our) heirs, executors, administrators, successors, and assigns (jointly and severally) do hereby acknowledge complete responsibility for all doctor, hospital, dental, first aid, and other medical expenses, and for transportation, extraneous room and board, and personal expenses which may be incurred while participating in the NCUSAR/CIL Program, and further covenant and agree that I (we) will at all times hereafter keep and save harmless and indemnify the Center for International Learning, the National Council on U.S.-Arab Relations, or affiliated partners, their legal representatives, or any and all other persons for whose acts or to whom it might be liable, against any and all actions or causes of action, claims, demands, liabilities, losses, damages or expenses which said institutions, their legal representatives, and any and all other persons for whose acts or to whom it might be liable, may incur by reason of the failure and refusal of the undersigned to conform to requirements of participants in the NCUSAR/CIL Program.

It is to be understood that this indemnification is not an undertaking on the part of the above-mentioned institutions of the responsibility for the above-mentioned expenses; nor is the release an admission of liability on the part of the said institutions.

The undersigned expressly reserve(s) all rights of action, claims, and demands against any and all other persons whoever not named herein.

In witness whereof I (we) have set my (our) hand(s) this _____ day of _____, 20____.

STUDENT’S NAME (print): _____

STUDENT’S SIGNATURE: _____

PARENT OR LEGAL GUARDIAN SIGNATURE (if student is under 21): _____



Affiliation Contract

All applicants are required to 'x' the boxes and sign below indicating they have read and understand the following agreements. Applicants must also answer all the questions found in this section:

Financial Responsibility – I understand it is my responsibility to cover the costs of the program not provided for in the scholarship. This includes program costs and my round-trip flight to and from Oman.

Medical and Repatriation Costs – I understand that potential medical and repatriation costs are not covered by the program and are the responsibility of the participants. Participants are highly encouraged to check with their current healthcare provider for information, and to purchase travelers insurance as needed.

Follow-Up and Expectations – I understand that this scholarship requires my full attention and participation in all events in Oman related to the program. Furthermore, I understand that I am expected to bring the knowledge and experience from this scholarship back to my home campus to educate my peers and communities.

Personal Conduct - I understand that I am a representative of my university, of the National Council, of the Center for International Learning, and of my country at all times and in all public places. I agree to abide by the laws of the United States, Oman, and any state or territory where I may be domiciled or present. I agree to accept and abide by the rules and standards of the Center for International Learning and to conduct myself professionally and to the standards of internationally accepted personal behavior at all times. I further understand that my failure to meet these laws, rules, and standards may result in me being ejected from the program.

1. Have you ever been found responsible for a disciplinary violation at any school you have attended, whether related to academic misconduct or behavioral misconduct that resulted in your probation, suspension, removal, dismissal or expulsion from the institution?

YES NO

2. Have you ever been convicted of a felony?

YES NO

If you answered yes to either or both questions, please attach a separate document(s) that gives the approximate date of each incident and explains the circumstances.

STUDENT'S NAME (print): _____

STUDENT'S SIGNATURE: _____

PARENT OR LEGAL GUARDIAN SIGNATURE (if student is under 21): _____

DATE: _____



Certification

I certify that the information included in this application is true and complete. I acknowledge that withholding or misrepresenting information may disqualify me from NCUSAR and Center for International Learning programs. I have read and understand the expectations outlined in all sections and forms above.

Note: Your signature on this application indicates that if accepted, you agree to follow the NCUSAR/Center for International Learning rules and guidelines during the language program you attend. A complete list of guidelines is included in the acceptance package.

STUDENT’S NAME (print): _____

STUDENT’S SIGNATURE: _____

PARENT OR LEGAL GUARDIAN SIGNATURE (if student is under 21): _____

DATE: _____

**COMPLETED PROGRAM APPLICATIONS SHOULD BE POSTMARKED BY THE
AFOREMENTIONED DATES TO:**

*National Council on U.S.-Arab Relations
1730 M Street, NW, Suite 503
Washington, DC 20036*

*If you have any questions please call the National Council on U.S.-Arab Relations at **(202) 293-6466**
or
email Ms. Megan Geissler, Director of Student Programs, at megan@ncusar.org*