**2020 Summer Diaspora Seminar in Rome**

**Application Form**

**Personal Information**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

Birth date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: female \_\_\_\_ male\_\_\_\_\_

Permanent Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street

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City State Zip

Phone: Home Cell

E-mail

Emergency contact name and address

Home telephone Business telephone

**Previous Language Study**

Language Level Years of Study

*Special diet needs:*

*Allergies or chronic ailments of which our Resident Director should be aware:*

**Statement of Current Study**

***For degree seeking students***

Please attach a description (in 500 words) of the degree you are seeking, and at which school and in which program you are currently enrolled. State any connections your work may have to Italian or Italian American Studies. Attach an official transcript or student copy of your transcript with this application. Also, have your dissertation director send a letter of recommendation, no longer than 500 words.

***For post-doctorate and professorial applicants***

Please state your research interests and their connection to Italian and/or Italian American Studies (in 500 words). Some issues you might address are: (1) If any, what courses have you taught that are related to any aspect of the Italian diaspora? (2) How will your participation in the seminar enhance your teaching profile? (3) What is and/or will be the relationship between your scholarly work and the Italian diaspora?

*United States citizens must have valid U.S. Passports.* Your passport should not expire within six months of your return trip from Italy. If so, you will not be allowed to board the plane at your U.S. point of departure.

***Payment Options***

A Non-refundable deposit of $500.00 is due upon acceptance to the program.

The balance of the fee is due on or before April 15, 2020.

Checks should be made payable to:

Friends of the John D. Calandra Italian American Institute Foundation

John D. Calandra Italian American Institute

25 West 43rd Street, 17th Floor

New York, NY 10036

Applicant’s name (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_